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COSELEY URBAN DISTRICT COUNCIL.

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# ANNUAL REPORT

ON THE  
PUBLIC HEALTH SERVICES

FOR

1937

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JAMES GORMAN, M.B., Ch.B., D.P.H.,  
Medical Officer of Health and School Medical Officer.

GEORGE H. PARKES, M.I.H., C.R.S.I., M.S.I.A.,  
Chief Sanitary Inspector.



COSELEY URBAN DISTRICT COUNCIL.

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**ANNUAL REPORT**  
OF THE  
**MEDICAL OFFICER**  
OF HEALTH

(JAMES GORMAN, M.B., Ch.B., D.P.H.)

FOR THE YEAR

1937

to which is appended the

**ANNUAL REPORT**  
OF THE  
**CHIEF SANITARY INSPECTOR**

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*(Printed by Order of the Council).*

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## COMMITTEES.

### HEALTH COMMITTEE.

Consisting of all Members of the Council.

*Chairman* : COUNCILLOR S. DAVIES, J.P.

### MATERNITY AND CHILD WELFARE COMMITTEE.

Consisting of all Members of the Council.

Councillor Allen.	Councillor Hill.
† „ Barnsley.	* „ Holden.
* „ Bayliss.	* „ Millington.
† „ Bennett.	„ Mobberley.
* „ Cox.	* „ Norton.
„ Davies.	„ Pritchett.
† „ Elwell.	„ Pugh.
„ Flavell.	† „ Richards.
„ Gough.	* „ Smout.
„ Grange.	† „ Southall.
„ Greensill.	† „ Swann.
„ Griffiths.	* „ Turton.
„ Hartland.	† „ Ward.
„ Higgins.	„ Wilson.

Mesdames Hancox and Smallman.

*Chairman* : COUNCILLOR S. DAVIES, J.P.

† Members who retired in April.

\* New Members.

### HOUSING AND TOWN PLANNING COMMITTEE.

Consisting of all Members of the Council.

*Chairman* : COUNCILLOR T. WILSON, J.P.

### SEWERAGE COMMITTEE.

Consisting of all Members of the Council.

*Chairman* : COUNCILLOR E. ALLEN.

## PUBLIC HEALTH OFFICERS OF THE AUTHORITY.

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Medical Officer of Health, Medical Officer for Maternity and Child Welfare, School Medical Officer—

JAMES GORMAN, M.B., Ch.B., D.P.H.

Hon. Consultant and Deputy Medical Officer of Health and School Medical Officer—

C. HOPE WADDELL, L.R.C.P.I., L.R.C.S.I., L.M.

Sanitary Inspector and Inspector of Factories and Workshops—

GEORGE H. PARKES, M.I.H., C.R.S.I., M.S.I.A.

Cleansing Superintendent, Assistant Sanitary Inspector, Inspector of Canal Boats—

FREDERICK E. TOON.

Additional Sanitary Inspector—

IRVINE FIELDHOUSE, A.R.San.I., M.S.I.A.

Inspectors of Shops—

FREDERICK E. TOON.  
ROBERT P. EVANS.

Health Visitors—

TRYPHENA NICHOLSON, C.M.B., R.S.I., S.R.N.  
DOROTHY FORSTER, C.M.B., R.S.I., S.R.N.

Clerkess—

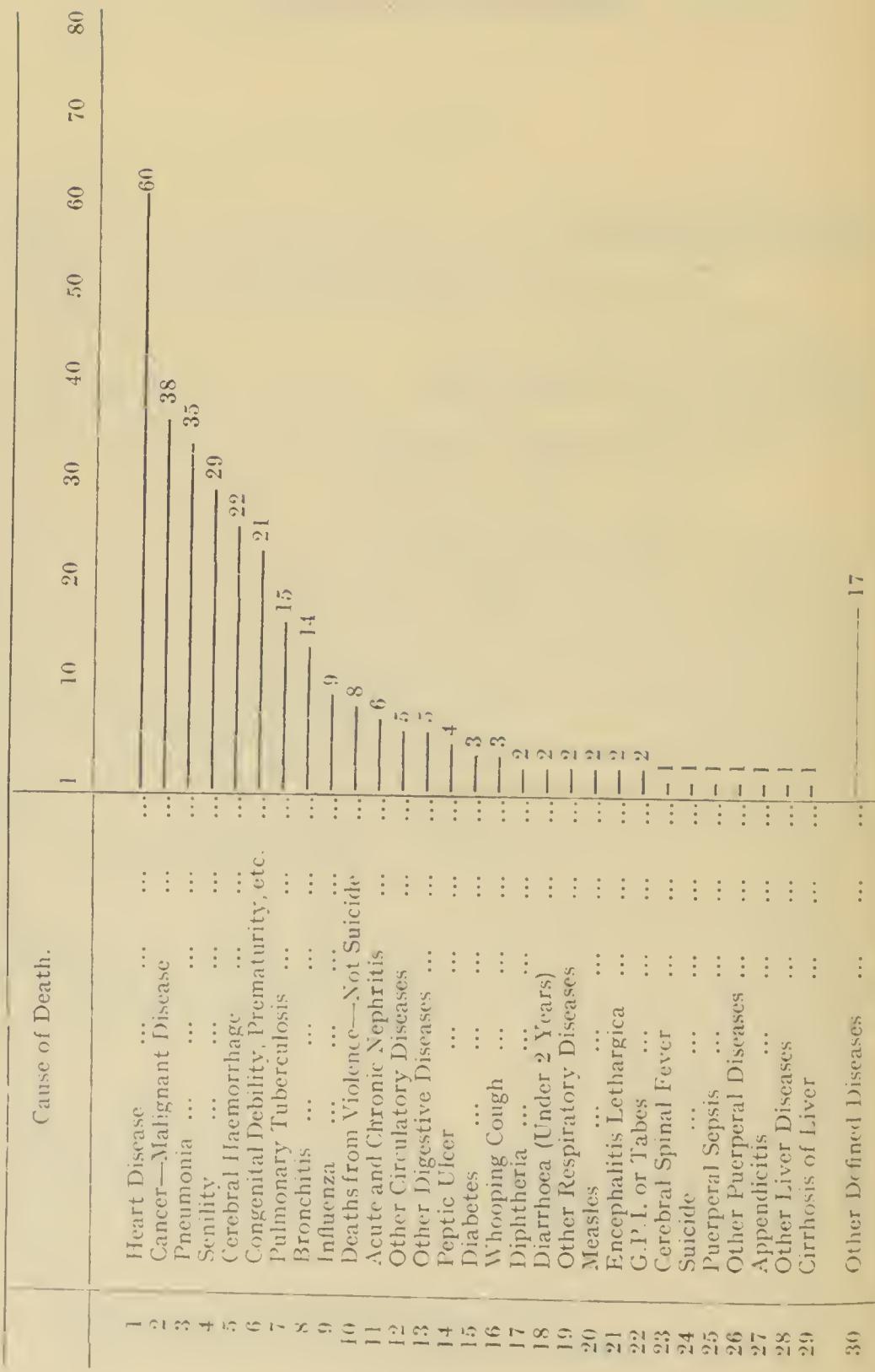
MISS J. MILLS (Resigned August, 1937).  
MISS E. GRAINGER (From September, 1937).

## SUMMARY OF CONTENTS.

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Area of District (in acres) ... ... ... ...	3,294
Population—1931 Census ... ... ... ...	25,137
,, Reg. General's Estimate (Mid. 1937) ...	28,120
Rateable Value (reduced) ... ... ... ...	£87,360
Amount of General Rate, 1936-37 ... ... ...	14/- in £
Sum represented by a Penny Rate ... ... ...	£324 14 8
No. of houses on Rate Book, December, 1937 ...	7,446
,, „ „ erected, 1937—By Council ...	246
,, „ „ erected, 1937—By Private Enterprise ...	250
,, „ „ demolished in 1937 ... ...	89
Total number of Houses owned by the Council ...	1,393
Live Birth-rate (Coseley) 1937, per 1,000 population ...	19.52
Death-rate (Coseley) 1937, per 1,000 population ...	12.91
Infantile Mortality Rate (1937) per 1,000 live births ...	63.75
Respiratory Tuberculosis Death Rate (Coseley) 1937 ...	0.53
Other Forms of Tuberculosis Rate (Coseley) 1937 ...	0.00
Cancer Death-rate (Coseley) 1937 ... ... ...	1.35
Diarrhoea and Enteritis Death-rate (children under two years) per 1,000 live births ... ... ...	3.64
Stillbirth Rate per 1,000 population (Coseley) 1937 ...	0.99
Stillbirth Rate per 1,000 live and stillbirths ... ...	48.52
Maternal Mortality Rate (Coseley) 1937—	
(a) per 1,000 live births ... ... ...	3.64
(b) per 1,000 total births ... ... ...	3.46
Influenza Death-rate, 1937 ... ... ...	0.32
Pneumonia Death-rate, 1937 ... ... ...	1.24
Violence Death-rate, 1937 ... ... ...	0.28

CHART showing Principal Causes of Death in Coseley in 1937.



COSELEY URBAN DISTRICT COUNCIL.

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# ANNUAL REPORT

OF THE

## Medical Officer of Health

(JAMES GORMAN, M.B., Ch.B., D.P.H.)

FOR THE YEAR 1937.

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*To the Chairman and Members of the  
Coseley Urban District Council.*

GENTLEMEN,

I have the honour as Medical Officer of Health to present to you the Annual Health Report for the year 1937.

### Vital Statistics.

The live Birth Rate remains well above that of the country as a whole, while the Death Rate—Adjusted—has dropped from last year and was 12.91 for 1937.

### General.

The most noteworthy event of the year was the opening of the new Maternity and Child Welfare and Minor Ailments Clinic at Bayer Hall.

This took place on December 4th when Councillor S. Davies, J.P., Chairman of the Health Committee presided.

A plan of the Clinic was included in last year's Health Report, and it will be appreciated that a considerable expansion of the existing services has now been made possible.

The immediate effects—a Dental session for expectant mothers and children under five, an increasing scope for the school dental service, the provision of an Ophthalmic clinic for school children and the inauguration of Ante-Natal Clinics, should be followed by a realisation on the part of the public that these changes are designed solely for their benefit.

I have mentioned elsewhere the problem of how best to deal with the outlying parts of the district.

### Maternity and Child Welfare.

*The Birth Rate*—19.52—is high, while the Infantile Mortality Rate at just over 63 shows a welcome reduction from last year's figure of 85.

*The Diarrhoea and Enteritis Death Rate* at 3.63 per 1,000 is also markedly and satisfactorily reduced as compared with 1936.

*The Maternal Mortality* shows a rise and is 3.46 per 1,000 births, but the circumstances do not seem to show this increase as significant, although it must be regretted.

### Infectious Diseases.

The urgency of providing adequate accommodation for the treatment of Infectious Disease cases becomes increasingly apparent as each year provides its periodical problems.

Towards the end of the year the Council made application to the Minister of Health for an order under the 1936 Public Health Act, Section 6, making certain districts into a united district under a Joint Board.

A development on the preventive side was the adoption of a Diphtheria Immunisation Scheme.

### Housing.

Almost five hundred houses were erected in the District during the year, and half of these were built by the Council.

The detailed report under the appropriate section shows that a determined effort was made to deal not only with unfit houses but also with the unfortunate cases of overcrowding which came to light during the survey.

As an earnest of future policy it might be mentioned that the Council approved the addition of some two hundred houses to the original Slum Clearance Programme.

### Offices.

Consequent upon the building of the new clinic the Health and School Medical staff were removed to the Old Bayer Hall, where certain preparatory alterations had been made. This change has been duly appreciated.

### Acknowledgments.

It is my pleasant duty once more to thank the Chairman and Members of the Health and Maternity and Child Welfare Committees for the manner in which I have been supported.

I recognise and appreciate the help which the Clerk, Mr. J. C. Roper, and other Officials have given during the year.

My best thanks are also due to Dr. Waddell and the members of my own staff who are ever willing to assist.

I remain,

Mr. Chairman and Gentlemen,

Your obedient Servant,

JAMES GORMAN.

## SECTION A.

---

Area ...	...	...	...	...	...	...	acres	3,294
Registrar General's Estimate of Population (Mid. 1937)								28,120
Number of inhabited houses	...	...	...	...	...	...		7,446
Rateable Value (reduced)	...	...	...	...	...	...	£	87,360
Sum represented by a penny rate	...	...	...	...	...	...	£	324 14 8

### Social Conditions.

No marked alteration falls to be noted.

### Unemployment.

Exact figures for the area are not available but no marked increase has been reported.

## EXTRACTS FROM VITAL STATISTICS.

### Births.

	Total.	Males.	Females.	Birth Rate per 1,000 estimated population.
Live—Legitimate	541	277	264	19.24
Illegitimate	8	5	3	.28
				Rate per 1,000 "Live" and "Still" Births.
Still—Legitimate	28	12	16	48.52
Illegitimate	—	—	—	—
" Still " Birthrate per 1,000 population	—	—	—	.99.

### Deaths.

Total.	Males.	Females.	Death Rate Adjusted per 1,000 estimated population.
313	167	146	12.91
		Deaths.	Rate per 1,000 "Live" and "Still" Births.
Deaths from Puerperal Sepsis	—	1	1.73
„ „ Other „ Causes	—	1	1.73

### *Death Rate of Infants under one year.*

All Infants per 1,000 Live Births	35	63.75
Legitimate Infants per 1,000 Legitimate Live Births	34	62.83
Illegitimate Infants per 1,000 Illegitimate Live Births	1	125.00

Deaths from Measles (all ages)	—	2	Per 1,000 estimated population.
„ „ Whooping Cough (all ages)	—	3	0.07
„ „ Diarrhoea (under 2 yrs.)	—	2	0.10

### *Deaths and Death Rate from Pulmonary*

	Tuberculosis	15	0.53
„ „ „ „ „ „	Pneumonia	35	1.24
„ „ „ „ „ „	Influenza	9	0.32
„ „ „ „ „ „	Cancer	38	1.35
„ „ „ „ „ „	Violence	9	0.32

## REVIEW OF VITAL STATISTICS.

Charts I, II, III, and Table IV, enable a comparison to be made with the health of the country as a whole, while the Deaths are further analysed in the Chart preceding the report and in Tables VI and XIV.

Heart Disease 60, Cancer 38 and Pneumonia 35, continue to be the three chief killing diseases.

Figures relating to the general and Infantile Mortality Rates for the various Wards are given below.

These are based upon an approximation of the Ward population.

This is the first report in which a divisional analysis of the District has been attempted.

### DEATHS AND DEATH RATES SHOWN IN WARDS.

#### WARDS.

	Highfield.	Hurst Hill.	South East.	Spring-vale.	West Central.
Approx. population	5,243	4,769	6,123	4,358	7,627
No. of Deaths ...	62	55	73	39	84
Death Rate per 1,000 population	11.82	11.53	11.92	8.95	11.1

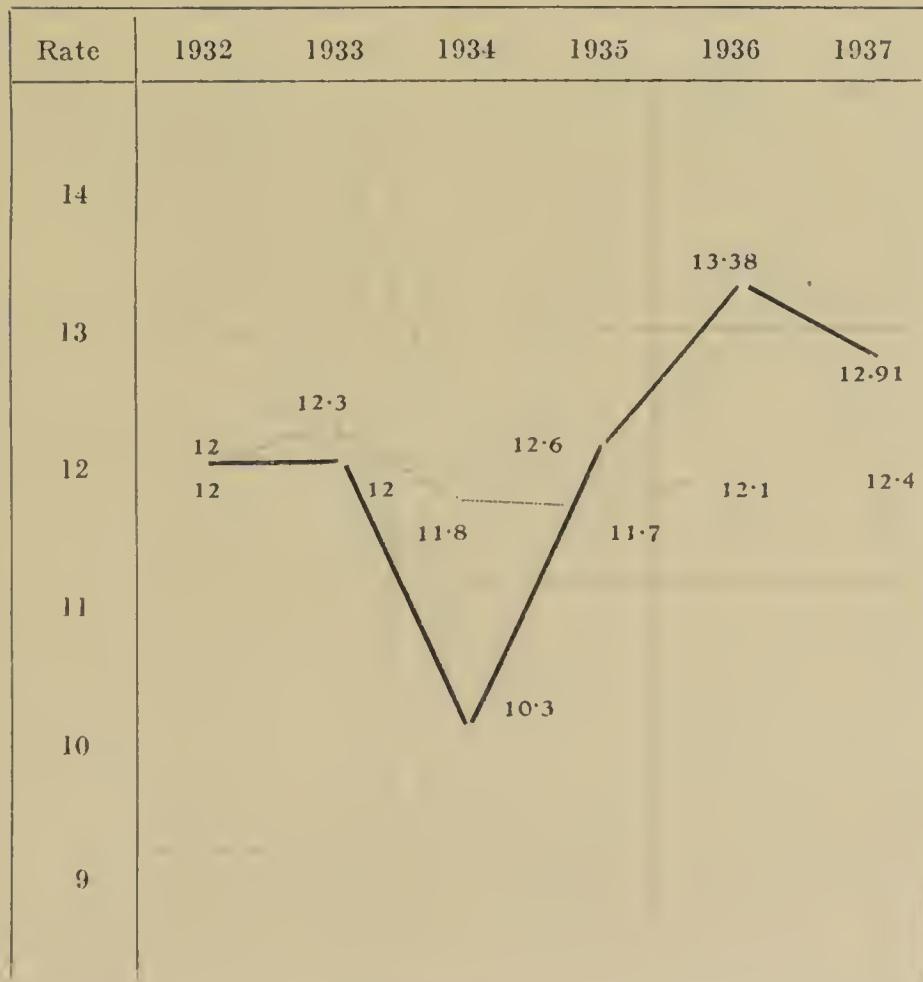
### INFANTILE MORTALITY SHOWN IN WARDS.

#### WARDS.

	Highfields.	Hurst Hill.	South East.	Spring-vale.	West Central.
Approx. population	5,243	4,769	6,123	4,358	7,627
No. of Live Births	112	78	139	79	141
Deaths under one year ...	11	4	7	4	9
Infantile Mortality Rate per 1,000 Live Births ...	98.21	51.28	50.36	50.63	63.83

CHART I.

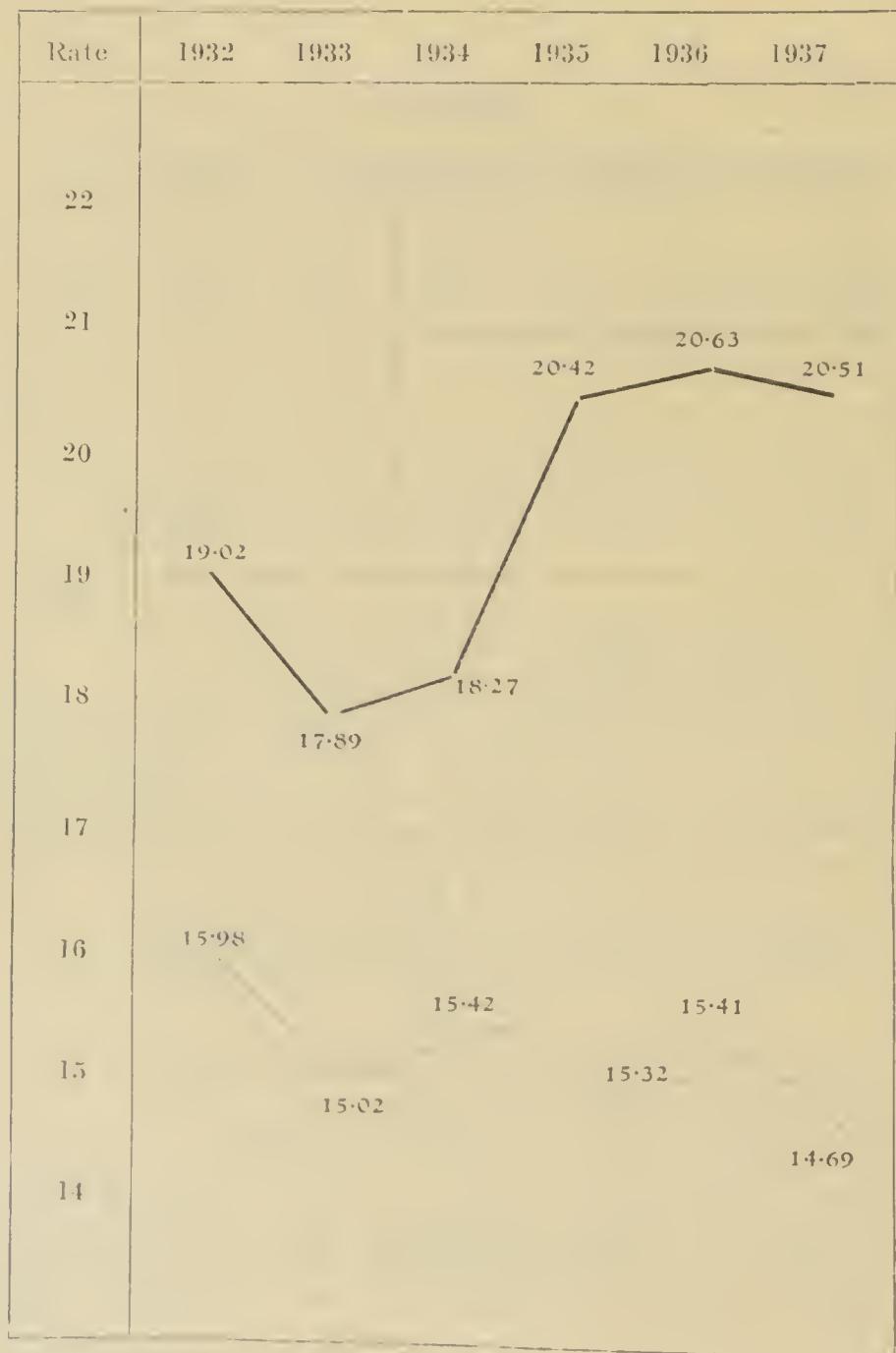
Showing Total Death Rate for England and Wales, and for Coseley per 1,000 population, 1932-37.



Coseley ——— England and Wales .....

CHART II.

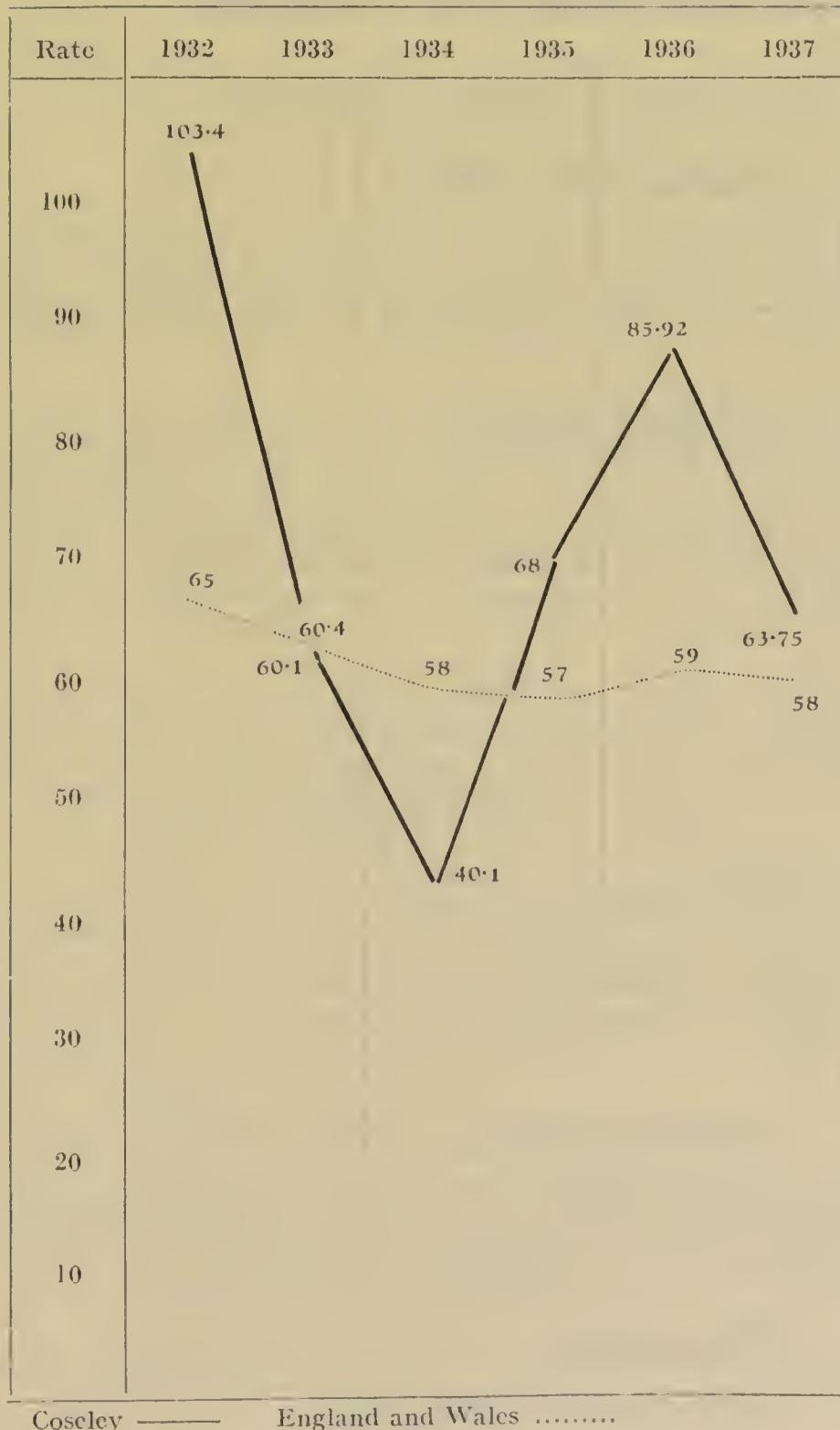
Showing Total Birth Rate for England and Wales, and for Coseley per 1,000 population, 1932-37.



Coseley —— England and Wales .....

CHART III.

Showing Infant Mortality for England and Wales, and for Coseley. Rate per 1,000 Births, 1932-37.



## SECTION B.

### General Provision of Health Services for the Area.

Details as to the Public Health Officers of the Authority have been incorporated at the beginning of the report.

#### 1. (i) Additional Sanitary Inspector.

The approval of the Ministry of Health to the appointment of an additional Sanitary Inspector—mentioned in last year's report—was duly given, and Mr. I. Fieldhouse, of Barnsley was appointed and commenced duty in September.

#### (ii) (a) Laboratory Facilities.

The County Laboratory, Stafford, deals with the bacteriological work of the district and it is a pleasure to record the co-operation afforded by Dr. Menton and his staff in this connection.

Results of swabs are given below.

TABLE A.

DISEASE.	RESULTS.		TOTALS.
	Negative.	Positive.	
Diphtheria ...	121	23	144
„ (Bact.) ...	2	—	2
Tuberculosis ...	22	8	30
„ (Bact.) ...	—	—	—
Others ...	12	2	14

#### (b) Ambulance Facilities.

No change has occurred but the Council are likely shortly to consider the acquisition of an Ambulance—chiefly for the removal of non-infectious cases to hospital.

#### (c) Home Nursing.

No change has occurred in this regard.

(d) Toddlers' Clinics.

These have been increased to two monthly and the figures are noted below.

A certain number of cases are selected from the Health Visitors' lists and invitations to visit the clinic are extended.

An analysis not only of the new cases, but also of the intervals which have elapsed since any previous visit shows that these clinics do secure the attendance of a number of children who would not in the ordinary course of events present themselves—at any rate to the Child Welfare Clinic—before school age.

I would also suggest that these cases, in the main, are not likely to secure periodical medical supervision in any other way, so that such clinics fill a niche in the Scheme of Health Services for the pre-school child.

Each year in early childhood is a basic one in the development of the child's well-being and an awakening of the public to a realisation of this is essential.

Many serious—although common—diseases attack children in the first five years of life, and in some cases, *e.g.* measles, a contempt, possibly borne of familiarity, seems to be present, with the result that consideration of unfortunate sequelæ of the illness does not enter into the scheme of things.

Whether it be through the medium of the private practitioner or the Local Health Authority is, from the point of view of preventive medicine unimportant, the point of paramount importance is that every child should receive some form of medical supervision prior to its first official examination as a school entrant.

Attendance at Toddlers' Clinics.

1,447 children attended at these clinics during the year, 75 paying their first visit.

(e) Treatment Centres and Clinics.

The opening of the new Maternity and Child Welfare and Minor Ailments Centre has been noted and the major step of providing a central, fully equipped Clinic has been taken.

Its situation and the facilities it offers will ensure that it will continue indispensable.

The residents in the outlying parts of the district afford a problem which will be unlikely to present its own solution.

An analysis of attendances at the Centre shows that, generally speaking, proximity to the Clinic has a real bearing upon the likelihood of attendance and the districts of Old Park Road, Parkfield, and Princes End, come readily to mind. These districts are, moreover, developing rapidly and I think an effort should be made to meet these people more in their own neighbourhood than is now possible.

Expensive, fully equipped Clinics are neither necessary nor desirable of reduplication, as it is not reasonable to expect all the effort to be made by one side, but as I suggested last year, all the more remote housing schemes should have provided some building capable of part-time use as a Child Welfare Centre.

The Local Authority can remedy this so far as their own Schemes are concerned and action on their part would form an excellent example in addition to disposing of an appreciable portion of the problem.

*(f) Hospitals.*

No change has occurred during the year.

**3. Midwifery and Maternity Services.**

Dr. Taylor from the Ministry of Health paid a visit and reviewed the services in detail.

**Midwives.**

The Staffordshire County Council through the Coseley District Nursing Association supervise the services under the 1936 Midwives Act.

Five Midwives have been appointed for the purpose.

**Maternity Services.**

A weekly Ante-Natal Clinic is to be conducted by Dr. J. A. Nagle, the Obstetric Registrar at the Women's Hospital, Wolverhampton, and due regard has been paid to the provision of suitable accommodation for difficult Ante-Natal and Post-Natal cases.

A feature of the arrangement is the continuity of supervision established, as any maternity cases requiring hospital treatment are admitted to the Women's Hospital.

A fee of 2/6 has been approved as payment to any practitioner for a report upon cases attending the Ante-Natal Clinic, but delivered by him, so that records of all cases should be kept in order.

Mr. Patrick Playfair, F.R.C.S., M.C.O.G., has been approved as a Consultant, and practitioners may now call in either Mr. S. W. Maslen-Jones or Mr. Playfair.

A Dental Clinic for expectant mothers and children under ~~five~~ is held monthly and should prove of great value.

The Area Organiser of the National Birth Control Association attended before the Maternity and Child Welfare Committee and explained the objects of her Association.

The work carried out by the Health Visitors is noted below with the Clinic attendance figures.

The percentage of total births coming to the Clinic within twelve months is still disappointing and it will be interesting to note what effect the provision of a better building will have on the figures.

No. of visits to children under 1 year of age—

First Visits	...	...	...	...	...	...	559
Total Visits	...	...	...	...	...	...	2,519

No. of visits to children between 1—5—

Total Visits	...	...	...	...	...	...	5,463
--------------	-----	-----	-----	-----	-----	-----	-------

Total attendances at Centre during the Year—

(1) By children under 1 year of age	...	...	...	...	...	2,979
(2) By children between 1—5 years of age	...	...	...	...	...	1,337

Total number of children who attended at the Centre for the first time during the year, and who, on the date of their first attendance were :—

(1) Under 1 year of age	...	...	...	...	249
Percentage of notified live births	...	...	...	...	43.21
(2) Between the ages of 1 and 5 years	...	...	...	...	75

Total number of children who attended at the Centre during the year, and who, at the end of the year, were :—

Under 1 year of age	...	...	...	...	...	199
Between the ages of 1 and 5 years	...	...	...	...	...	474

### **Refresher Courses.**

It has been suggested that the Health Visitors should be permitted to attend suitable refresher courses when occasion arises.

The staff can only be held of the greatest value to their Authority when they are encouraged to keep themselves in step with the times and action on the preceding lines would be a great incentive to do so.

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The holding of additional clinics has augmented the work of the two Health Visitors considerably.

### **Free Milk Scheme.**

Some thirty families were specially recommended for benefit and were duly approved by the Committee.

19 of these took full advantage of the arrangements.

5 did not attend at all after recommendation.

1 attended once only.

5 attended for less than one month.

It has, therefore, been possible to tide over a certain number of people during the year although it is unsatisfactory to see that quite a number of cases after making application fail to follow up.

### **4. Child Life Protection.**

The number of children on the Register is three.

The Health Visitors act as Child Protection Visitors and a visit was paid by Miss Allden from the Ministry of Health during the year.

### **5. Orthopaedic Treatment.**

No definite Scheme exists and cases are referred casually to Wolverhampton Royal Hospital.

A Scheme will be submitted to the Committee during the ensuing year.

## 6. Voluntary Workers.

My best thanks are due to the small group of ladies who have so enthusiastically assisted the work at the Welfare Centre in a voluntary capacity. Unless some form of help such as this was forthcoming, it would be very difficult to secure the smooth running of the Child Welfare Clinics.

## SECTION C.

### Sanitary Circumstances of the Area.

#### 1. (i). Water.

No new sources of supply have been made available.

A well supplying houses dealt with as a Slum Clearance Area, gave an unsatisfactory result to an analysis, and following warnings to all users that any water for drinking or domestic purposes should be boiled before use, a main piped supply was provided.

Apart from one isolated well the district, so far as is known, has a piped supply.

Bacteriological and Chemical check is kept both by the Authorities responsible for it and by ourselves as consumers.

Particulars are appended below.

#### WATER SUPPLIED BY THE BOROUGH OF BILSTON.

*Analysis of Water taken 3rd February, 1937.*

	Parts per 100,000.
Total Solid Matter dried at 212° F. ...	34.5
Free and Saline Ammonia ...	0.0
Albuminoid ...	0.0
Nitric Nitrogen ...	0.70
Chlorine ...	2.2
Oxygen absorbed in 4 hours at 80° F. ...	0.005
Appearance ...	Clear
Injurious Metallic Contamination ...	0.0
P.H. Value ...	7.5
Hardness before Boiling ...	17.16°
Hardness after Boiling ...	6.40°
Temporary Hardness ...	10.76°

This water is chemically of satisfactory quality, being almost identical with the sample submitted last May which was pronounced of excellent quality for drinking purposes.

*Bacteriological Examination.*

On nutrient agar after 48 hours incubation  
at 37° C. ... ... ... ... 3 colonies per ml.

On nutrient agar after 72 hours incubation  
at 2—22° C. ... ... ... 13 colonies per ml.

*Coli Aerogenes Content (presumptive Coli).*

After 48 hours incubation at 37° C. ... ... None per 100 ml.

WATER SUPPLIED BY THE BOROUGH OF WOLVERHAMPTON.

*Chemical Analysis.*

						Parts per 100,000.
Free and Saline Ammonia	...	...	...	...	...	0.00
Albuminoid Ammonia	...	...	...	...	...	0.00
Chlorine in Chlorides	...	...	...	...	...	3.80
Nitrogen in Nitrates and Nitrites	...	...	...	...	...	0.44
Oxygen absorbed from permanganate at 80° F. in 4 hours						0.018
Total Solids dried at 100° C.	...	...	...	...	...	38.00
Appearance	...	...	...	Bright, free from all particles		
Metals	...	...	...	...	...	absent
P.H. Value	...	...	...	...	...	7.7
Temporary Hardness	...	...	...	...	...	10.4
Permanent Hardness	...	...	...	...	...	9.2
Total Hardness	...	...	...	...	...	19.6

*Bacteriological Examination.*

Total count reveals 1 organism (a mould) per c.cm.

Coli-aerogenes absent from 1 tube out of 1 of 50 c.cm.

Coli-aerogenes absent from 5 tubes out of 5 of 10 c.cm.

Coli-aerogenes absent from 5 tubes out of 5 of 1 c.cm.

Probable number of coli-aerogenes organisms contained in 100 c.cm.  
of the original water ... 0.

## WATER SUPPLIED BY THE SOUTH STAFFORDSHIRE WATERWORKS.

### Chemical Analysis.

							Parts per 100,000.
P.H. Value	...	...	...	...	...	...	6.9
Alkalinity (CaCO <sub>3</sub> )	...	...	...	...	...	...	7.8
Chlorides (Cl.)	...	...	...	...	...	...	2.60
Ammoniacal Nitrogen	...	...	...	...	...	...	Trace
Albuminoid Nitrogen	...	...	...	...	...	...	Trace
Oxidised Nitrogen	...	...	...	...	...	...	.23
Oxygen Absorbed (3 hrs. at 27°C.)	...	...	...	...	...	...	.012
Temporary Hardness	...	...	...	...	...	...	7.2
Permanent Hardness	...	...	...	...	...	...	4.2
Total Hardness	...	...	...	...	...	...	11.4
Iron (Fe).	...	...	...	...	...	...	.001
Manganese (Mn).	...	...	...	...	...	...	Nil.

### Bacteriological Examination.

Bacteria.	Colonies per ml.	Bacterium Coli.	
Nutrient Agar at 20°C. 3 days	85	Presumptive Test	Absent
Nutrient Agar at 37°C. 1 day	2	Confirmatory Tests	Absent
Nutrient Agar at 37°C. 2 days	4		

### Physical Characters.

Colour (Burgess)	...	...	Taste	...	...	Nermal
Turbidity	.....	Trace susp. matter.	Odour	...	...	Nil.

### (ii) Drainage and Sewerage.

Extensions to our disposal works at the Foxyards formed the subject of a Ministry of Health Inquiry after which approval was granted.

The cost will be approximately £26,000, and the area to be served chiefly the South West portion of the district.

Details of the extension are given herewith, the scheme being planned by Major A. H. S. Waters, M.Inst.C.E., as Consulting Engineer.

The extended works comprise the extension of the existing Disposal Works in part to provide for the relief of existing units at present overloaded, and in part to provide for extensive housing development likely to take place in the near future, together with the construction of certain additional sewers, storm overflows and surface water drains.

The extensions of the existing Disposal Works are designed to enable the enlarged Works to deal with a maximum dry weather flow of 445,400 gallons per 24 hours made up approximately as follows, viz. :—

Estimated present population	...	...	...	15,000	persons.
Additional future population provided for	...	...	...	7,270	„
<hr/>				<hr/>	
Total population provided for	...	...	...	22,270	„
Estimated water consumption per head of the future population	...	...	...	...	20 g.p.d.
Total d.w.f. provided for	...	...	...	...	445,400 g.p.d.

The intended works comprise the replacement of the existing inadequate screening chambers, for which larger chambers fitted with mechanically raked screens will be substituted, the construction of an additional detritus tank and one additional Sedimentation Tank, the putting down of four additional Bacteria Beds and appropriate dosing arrangements, the addition of one Humus Tank, and the construction of additional Sludge Lagoons.

The added units will be generally similar to the existing units in design and construction, but operation of the extended works will be facilitated and rendered more efficient by the provision of a mechanical sludge-scraping device on the new Sedimentation Tank and by the construction of a small motor-driven sludge pumping installation.

The new sewers which it is intended to construct comprise the replacement of a length of some 335 lineal yards of existing sewer, the provision of storm overflow chambers to limit the flow to the Disposal Works to 6 x d.w.f. with storm overflow pipes, and the construction of a storm water drain. These works of sewerage will not be carried out until a commencement is made upon the Dudley Corporation's intended housing development, which will be drained on a separate system.

## CLEANSING SUPERINTENDENT'S REPORT.

### SECTION C.

#### Sanitary Circumstances of the Area

##### 1. (ii). Sewer Extensions Carried Out by the Council.

*During the year March, 1937—March, 1938, further extensions of sewers were carried out as follows :—*

###### **1. PICKRELL ROAD.**

An extension of 40 lineal yards of 6" Foul Water Sewer with One Manhole to drain houses erected by Private Enterprise.

###### **2. BURTON ROAD.**

An extension of 100 lineal yards of 6" Foul Water Sewer with Three Manholes to dispense with unsatisfactory dumbwells to existing property.

###### **3. PARKES HALL.**

An extension of 154 lineal yards of 9" Foul Water Sewer with Three Manholes across fields to drain 96 houses erected by Private Enterprise.

###### **4. BILSTON ROAD.**

An extension of 123 lineal yards of 6" Storm Water Sewer to overcome flooding on the above Road.

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#### Sewers on Housing Schemes.

The following sewers have been laid to accommodate Housing erected by the Council :—

#### **WEDNESBURY OAK HOUSING SITE**

278 lineal yards of 9" Foul Water Sewer along Road No. 9 (Batmans Hill Road) including three Manholes.

## Sewers Constructed and Laid by Private Enterprise.

### 1. RICHMOND ROAD.

A length of 75 lineal yards of 6" Foul Water Sewer with two Manholes to drain 32 houses. Also 116 lineal yards of 6" Storm Water Sewer to serve the above houses.

### 2. GLENFERN ROAD.

A length of 92 lineal yards of 6" Foul Water Sewer with two Manholes.

### 3. PRUDEN AVENUE.

An extension of 106 lineal yards of 6" Foul Water Sewer and One Manhole to serve 18 bungalows.

### 4. LAPPER ROAD.

A length of 120 lineal yards of 6" Foul Water Sewer with Manholes to serve 10 bungalows.

### 5. WARD GROVE.

An extension of 83 lineal yards of 6" Foul Water Sewer with One Manhole to serve 18 houses.

### 6. MOUNT ROAD.

An extension of 266 lineal yards of 9" Foul Water Sewer with Four Manholes to serve development now taking place.

### 7. BRYNMAWR ROAD.

A length of 95 lineal yards of 9" Foul Water Sewer with Two Manholes.

### 8. DIMMOCK AVENUE.

A length of 146 lineal yards of Foul Water Sewer with Two Manholes to serve development now taking place.

### 9. ROSEMARY CRESCENT.

148 lineal yards of 9" Foul Water Sewer with Manholes to serve approximately 90 houses. Also 180 lineal yards of 9" Storm Water Sewer to serve the above houses.

### 10. STANTON AVENUE.

A length of 73 lineal yards of 6" Storm Water Sewer.

## 11. GRIFFITHS ROAD.

A length of 77 lineal yards of 9" Storm Water Sewer with One Manhole.

### 3. (i). Closet Accommodation.

No. of Water Closets in the District	...	...	...	...	6,896
No. of Privy Vaults	...	...	...	...	56
No. of Privy-Middens	...	...	...	...	3
No. of Pail-Closets	...	...	...	...	60
No. of Cesspools	...	...	...	...	70
No. of Ashbins	...	...	...	...	7,386
No. of Privies converted to Water Closets	...	...	...	...	14
Cesspools abolished and drainage connected to Sewer					12

### (ii). Public Cleansing.

#### Report by Cleansing Superintendent.

The Cleansing Department is under the control of the Cleansing Superintendent and he is responsible for the collection and disposal of house refuse, the emptying of the remaining few pail closets and privies, the cleansing of cesspools and when necessary the gritting of roads.

Both motor and horse-drawn vehicles are engaged in the work of the Department, the horse-drawn vehicles being employed in those areas which are nearest the points of disposal.

A staff of nineteen men is engaged on the work of collection and three on disposal.

Work of collection is still organised on a weekly basis, all dustbins being emptied by day and pails and privies by night.

The erection of new dwellings both by the Council and Private Enterprise still continues and with the ever increasing number of premises to be cleansed it has been found necessary to increase the number of workmen in the Department, and also to bring into service a new pneumatic tyred covered horse drawn vehicle. The provision of a new motor vehicle is also under consideration.

#### Refuse Disposal.

The disposal of refuse is carried out on controlled lines in accordance with the recommendations of the Ministry of Health and this work is under constant supervision.

Fortunately tipping sites and suitable covering material is available without inconvenience. As an example of what can be done on controlled tipping lines, an area of low-lying land, formerly a quarry, off Ettingshall Road has been dealt with. The land has been raised to a suitable level and in due course building operations will be enabled to take place thereon.

In a surprisingly short space of time the appearance of land is changed completely, following controlled tipping operations. At the end of each day it is well-nigh impossible to observe any trace of house refuse, the site presenting a clean and finished appearance by the level of covering.

No complaint has been received following tipping on these lines.

(ii) The following particulars give the estimated tonnage of each vehicle :—

No. 1.	Estimated load of 2 ton Vehicle :—	1 ton 16 cwts.
No. 2.	„ „ „ 30 cwt.	1 ton 4 cwts.
No. 3.	„ „ „ 1 ton	18 cwts.
No. 4.	„ „ „ Cart Load	15 cwts.
No. 5.	„ „ „ Cart Load	15 cwts.
No. 6.	„ „ „ Tank Load	15 cwts.

No. of Vehicle.	Collection in Loads.	Estimated in Tons.
No. 1.	2,175	3,915
No. 2.	2,905	3,486
No. 3.	1,749	1,574
No. 4.	1,332	999
No. 5.	512	384
No. 6.	400	300
	—	—
	9,073	10,658
	—	—

Total refuse collected in tons—10,658 tons.

Number of houses and other premises—7,890.

Population—28,120.

Weight (in cwts.) per 1,000 population per day (365 days to year) = 20.7 cwts.

Figures given from the Council's Account Books :—

Particulars.	Coll.	Desp.	Total.
Gross Expenditure ...	£2762	£412	£3,174
Gross Expenditure per ton ...	5/2d.	9½d.	5/11½d.
Cost per 1,000 premises ...	£350	£52	£402
Cost per 1,000 population ...	£98	£15	£113
Rate poundage ... ...	8.2d.	1.2d.	9.4d.
Percentage to Total rate ...	4.9d.	.7d.	5.6d.

The following table gives the costs during the past three years :—

Year ended March 31st.	Collection and Disposal.	Premises Cleansed.	Cost per annum of Premises Cleansed.
1936	£2,487	6,940	7/2
1937	£2,730	7,340	7/5
1938	£3,174	7,890	7/11

Canal Boat Acts.

During the year the number of registered canal boats inspected was 24, and these were found in a clean and Sanitary state, entirely free from overcrowding and infectious disease.

There is no change in the traffic, all the boats conveying goods long distances passing through Coseley, making no calls in the district.

The accommodation on the boats allowed 86 persons and were occupied by 33 men, 18 women, 14 children.

F. E. TOON,

Cleansing Superintendent.

Assistant Sanitary Inspector.

Inspector of Canal Boats.

Shops Acts, 1912-1936.

During the year under review, inspection was made of all the shops in the district and shopkeepers informed of the requirements of the Shops (Sunday Trading Restriction) Act, 1936, which came into force on 1st May, 1937. A pamphlet containing a summary of the provisions of the Shops Acts, 1912-1936 was supplied to all shopkeepers concerned.

It is pleasing to note on further visits the observance of the Acts. The required notices were exhibited in the exterior and the interior of the shops, in the form prescribed by the Regulations (Form L) in letters of not less than one inch in height, stating the purpose for which and the hours which the shop is open on Sunday.

In the few shops where assistants and young persons are employed, the forms required pursuant to the Shops Act, 1934, *i.e.*, Records and Abstracts, are exhibited and at all times open for inspection. The provisions in so far as concern the health and comfort of the shop assistants, the lighting, temperature, ventilation and sanitary accommodation are being satisfactorily carried out.

F. E. TOON,

R. P. EVANS,

Shops Inspectors.

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#### Eradication of Bed Bugs.

Ninety-five houses and their effects were disinfested with the liquid insecticide "Clymax." This was done prior to the removal of the families to new Council houses, and as follow-up visits to these families have been made with negative results, so far as bug infestation is concerned, it may be said that satisfactory conditions prevail.

While bug infestation may occur through the purchase of infested second-hand furniture the possibility of a spread by personal means, *e.g.*, clothing, is always worthy of consideration.

No provision has been made for the use of Hydrogen Cyanide for disinfestation purposes.

#### (v). Smoke Abatement.

No change has occurred in the arrangements during the year.

#### (vi). Swimming Baths and Pools.

Coseley does not possess swimming baths and there is only one small privately owned pool in the area which is not used to any extent for public purposes.

The water from the pool—which is partly in a neighbouring authority—has been examined and gave no grounds for action.

#### 4. Schools.

The sanitary conditions and water supply to the schools in the area are satisfactory.

Criticism of the lighting in certain of the schools is made in the report to the Education Committee.

THE  
ANNUAL REPORT  
OF THE  
Chief Sanitary Inspector  
FOR THE YEAR 1937.

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*To the Chairman and Members of the  
Coseley Urban District Council.*

GENTLEMEN,

I have much pleasure in presenting a report on the Sanitary Inspection of the District for the year 1937, this being my Tenth Annual Report.

#### **Routine Inspections.**

During the year, the total inspections of all kinds numbered 4,304. The visits *re* complaints, inspections and general matter totalled 3,599, and in connection with the following-up of notices and works-in-progress, 705. Details in Table I.

#### **Complaints.**

Three hundred and thirty-two complaints, relating to nuisances or sanitary defects were received during the year, all of which received the necessary attention.

#### **Notices.**

The total number of notices served during the year was, "Informal"—One hundred and eighty, "Abatement"—Thirty-four.

## Summary of Inspections.

TABLE I.

Visits <i>re</i> Complaints	...	...	...	...	...	...	332
,, <i>re</i> Inspections	...	...	...	...	...	...	385
,, to Works in progress	...	...	...	...	...	...	320
Infectious cases visited	...	...	...	...	...	...	56
Houses Disinfected	...	...	...	...	...	...	67
Visits to Slaughter-houses	...	...	...	...	...	...	1,104
,,,, Meat Shops	...	...	...	...	...	...	676
,,,, Cowsheds and Dairies	...	...	...	...	...	...	79
,,,, Fish Friers Premises	...	...	...	...	...	...	63
,,,, Bakehouses	...	...	...	...	...	...	88
,,,, Factories and Workshops	...	...	...	...	...	...	95
,,,, Offensive Trades	...	...	...	...	...	...	52
,,,, Outworkers Premises	...	...	...	...	...	...	12
,,,, Slaughter on Private Premises	...	...	...	...	...	...	23
,, <i>re</i> Pigkeeping	...	...	...	...	...	...	25
,, to Caravan Dwellers	...	...	...	...	...	...	21
,,,, Schools	...	...	...	...	...	...	12
,,,, Overcrowded Houses (re-checking)	...	...	...	...	...	...	597
,,,, Council Houses	...	...	...	...	...	...	86
Houses Disinfested	...	...	...	...	...	...	95
Miscellaneous Visits	...	...	...	...	...	...	116
						Total	4,304

## Sanitary Defects.

The sanitary defects or nuisances for which notices were issued numbered 827 and the premises affected 303. The following is a summary of these defects.

TABLE II.

## Defects.

Houses with defective Roofs	...	...	...	...	...	...	60
,,,, Eavesgutters or R.W.P's	...	...	...	...	...	...	25
,, without Eavesgutters or R.W.P's	...	...	...	...	...	...	22
,, with dirty and defective internal walls	...	...	...	...	...	...	68
,,,, ceilings	...	...	...	...	...	...	73
,,,, defective wood floors	...	...	...	...	...	...	20
,,,, quarry floors	...	...	...	...	...	...	33
,,,, general woodwork	...	...	...	...	...	...	25
,,,, windows	...	...	...	...	...	...	44

Houses with fixed windows	...	...	...	...	...	...	12
,,	dirty and defective staircases	...	...	...	...	...	27
,,	defective treads and risers	...	...	...	...	...	25
,,	,, chimneys	...	...	...	...	...	6
,,	,, brickwork of walls	...	...	...	...	...	35
,,	damp walls	...	...	...	...	...	21
,,	defective firegrates	...	...	...	...	...	19
Defective Wash-house walls	...	...	...	...	...	...	24
,,	roofs	...	...	...	...	...	14
,,	floors	...	...	...	...	...	4
,,	fireboxes	...	...	...	...	...	8
,,	boilers	...	...	...	...	...	4
,,	or improper sinks	...	...	...	...	...	24
,,	and obstructed drains	...	...	...	...	...	44
,,	W.C. walls	...	...	...	...	...	3
,,	roofs	...	...	...	...	...	7
,,	pedestals (broken)	...	...	...	...	...	11
,,	fittings	...	...	...	...	...	28
Yard paving defective	...	...	...	...	...	...	5
Animals so kept as to be a nuisance	...	...	...	...	...	...	3
Offensive accumulations	...	...	...	...	...	...	2
						Total	827
Premises affected	...	...	...	...	...	...	303

### Sanitary Improvements.

The defects remedied or nuisances abated numbered 762, and the premises affected 326. Particulars of same will be found in the following table.

TABLE III.

### Improvements.

Roofs repaired	...	...	...	...	...	...	66
Eavesgutters or R.W.P's repaired	...	...	...	...	...	...	26
,,	,, provided	...	...	...	...	...	21
Houses, internal walls re-plastered and cleansed	...	...	...	...	...	...	76
,,	ceilings re-plastered and cleansed	...	...	...	...	...	74
,,	wood floors repaired or re-laid	...	...	...	...	...	21
,,	quarry floors repaired or re-laid	...	...	...	...	...	33
,,	general woodwork repaired	...	...	...	...	...	28
,,	windows repaired or new provided	...	...	...	...	...	39
,,	,, made to open	...	...	...	...	...	11
,,	staircases re-plastered and cleansed	...	...	...	...	...	27
,,	,, treads and risers repaired	...	...	...	...	...	25

## Improvements—contd.

Houses, chimneys brickwork repaired	...	...	...	9
„ brickwork of walls repaired	...	...	...	33
„ „ „ pointed up	...	...	...	41
„ damp walls treated	...	...	...	21
„ firegrates repaired or new provided	...	...	...	16
Wash-house walls repaired	...	...	...	28
„ roofs „	...	...	...	15
„ floors „	...	...	...	6
„ fireboxes provided	...	...	...	9
„ boilers	...	...	...	7
„ sinks repaired or new provided	...	...	...	21
Drains opened and cleansed	...	...	...	44
W.C. walls repaired	...	...	...	6
„ roofs „	...	...	...	9
„ pedestals provided	...	...	...	8
„ fittings repaired or new provided	...	...	...	28
Yard paving repaired or re-laid	...	...	...	5
Animals removed (nuisance abated)	...	...	...	3
Offensive accumulations removed	...	...	...	2
			Total	762
Premises affected	...	...	...	326

## Meat and Food Inspection.

### Slaughterhouses.

At the end of the year there was one Registered, and ten Licensed slaughterhouses on the register.

The number of visits made to slaughterhouses for the purpose of meat inspection was 1,104, and to private premises on the occasion of slaughter, 23. The visits were made as far as practicable, just after or at the time of slaughter.

Meat shops are visited for the purpose of cleanliness, as well as for the inspection of meat offered for sale, 676 visits were made to these premises. In no instance was diseased or unfit meat found, and I think it can be generally taken that the visits are appreciated, for the butchers of Coseley are anxious that meat offered for sale shall be equal to that of any neighbouring district.

455 notices of slaughter were received, concerning :—

Bovines	...	...	...	...	...	964
Sheep and Lambs	...	...	...	...	...	4,142
Pigs	...	...	...	...	...	4,714
						—
					Total	9,820
						—

23 notices were received in regard to 64 Pigs slaughtered on unlicensed premises.

5,138 lbs. of fresh meat and offals, and 120 lbs. of pressed and cooked meats were condemned as unfit for human consumption, the same being voluntarily surrendered.

TABLE IV.

Unsound and Diseased Food Condemned with, approximate weight.

Food Stuff.	Reason for Destruction.	Tons.	Cwts.	lbs.
One Calf	Immaturity	—	—	45
One Pig	Moribund	—	1	2
Pigs Heads and Organs	Diseased (Tuberculous)	1	8	0
Sheep Organs	Diseased and Parasitic	—	3	57
Bovine Organs	Parasitic and Tuberculous	—	12	102
Cooked Meats	Decomposition	—	1	8
	Total Weight	2	6	102

TABLE V.

## Carcases Inspected and Condemned.

	Cattle ex- cluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number killed (if known) ...	475	450	39	4,142	4,714
Number Inspected ... ...	455	441	38	3,950	4,566
<i>All diseases except Tuberculosis.</i> Whole carcase condemned ...	Nil.	Nil.	Nil.	Nil.	Nil.
Carcases of which some part or organ was condemned ...	4	17	Nil.	103	Nil.
Percentage of the number in- spected affected with disease other than Tuberculosis ...	.8	3.74	Nil.	2.74	Nil.
<i>Tuberculosis Only.</i> Whole carcases condemned ...	Nil.	Nil.	Nil.	Nil.	Nil.
Carcases of which some part or organ was condemned ...	2	21	Nil.	Nil.	187
Percentage of the number in- spected with Tuberculosis ...	.4	4.76	Nil.	Nil.	4.1

## Dairies, Cowsheds and Milk Shops.

Twelve cowkeepers were on the register at the end of the year (three having given up cowkeeping owing to the acquisition of the land for building purposes, or the inability to keep up with present day demands). Fourteen wholesale traders, and fifty-six milk retailers, the majority coming from adjoining areas.

## Milk (Special Designation) Order, 1936.

Supplementary licences granted or renewed for the sale of graded milks during the year—"Tuberculin Tested"—3; "Accredited"—1; "Pasteurised"—2.

## Factory and Workshops Act.

The number of workshops and workplaces in the district are comprised as follows:—

Bakehouses	...	...	...	...	...	...	8
Boat Builders	...	...	...	...	...	...	2
Boot Repairers	...	...	...	...	...	...	11
Coal Wharfs	...	...	...	...	...	...	4
Garages, etc.	...	...	...	...	...	...	9
Joiners, Builders and Decorators							16
Scrap Dealers	...	...	...	...	...	...	3
Tailors	...	...	...	...	...	...	16
Wheelwrights	...	...	...	...	...	...	7
Miscellaneous	...	...	...	...	...	...	10
							—
						Total	86
							—

147 visits were made to Factories and Workshops, and 88 to bakehouses. There were on the register at the end of the year, nine bakehouses.

## Outworkers (Factory and Workshops Act, 1901).

There were seven registered outworkers in the district at the end of the year, these conformed to the requirements of the Act. No case of Infectious Disease was notified among the outworkers.

### 1. Inspection of Factories, Workshops and Workplaces.

The following Table is that required by the Home Office and represents the work carried out by the Sanitary Inspector in connection with Factories, Workshops and Workplaces.

TABLE VI.

Premises. (1)	Inspec- tions. (2)	Number of	
		Written Notices. (3)	Occupiers prosecuted (4)
Factories	48	1	Nil.
(Including Factory Laundries)			
Workshops	187	3	Nil.
(Including Workshop Laundries)			
Workplaces	Nil.	Nil.	Nil.
(Other than Outworkers' premises)			
Total	235	4	

## 2. Defects found in Factories, Workshops and Workplaces.

TABLE VII.

Particulars. (1)	Number of Defects.			Number of offences in respect of which Prosec- utions were instituted. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
<i>Nuisances under the Public Health Acts :—*</i>				
Want of cleanliness ...	3	3	Nil.	Nil.
Want of ventilation	—	—	—	—
Overcrowding	—	—	—	—
Want of drainage of floors	—	—	—	—
Other nuisances	—	—	—	—
Sanitary accommodation—				
Insufficient ...	—	—	—	—
Unsuitable or defective	1	Nil.	Nil.	Nil.
Not separate for sexes	—	—	—	—
<i>Offences under the Factory and Workshop Acts :—</i>				
Illegal occupation of under-ground bakchouse (s. 101)	—	—	—	—
Other offences ...	—	—	—	—
(Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921).				
Total ...	4	3	Nil.	Nil.

\* Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

## Infectious Diseases.

The cases of infectious disease, Scarlet Fever, Diphtheria, Dysentery, etc., were investigated and recorded. When the patient was removed to hospital disinfection was carried out as soon as possible after the removal. Where the patient was nursed at home, necessary instructions were given, also a list of instructions, for the prevention of the spread of the disease, and at the termination of the period of infectivity, the necessary disinfection was carried out.

## General.

The supervision of food supplies is an important duty of the Sanitary Inspector. Under this heading can be included Bake-houses, Slaughterhouses, Cowsheds and Dairies, Ice-cream premises, Wet and Fried Fish premises, Gnt scraping premises; also the modern innovation—the Travelling Shop. The foods dealt with are many and varied.

The past few years have seen a marked advance in the variety of tinned foods that are offered for sale. Meat, fish and milk were practically the only preserved foods put up in tinned containers at one time, to-day we can obtain almost any kind of fruit and vegetables for our table at a time when fresh fruit and vegetables are out of season.

It is undoubtedly true to say that the advance is due to the efforts of the Canners, who, by research, great care in the selection of the raw food materials, improved methods of canning, and efficient sterilization, have been able to preserve these foods, reduce the risk of the consumer to a minimum and at the same time make the industry a commercial proposition.

I am, Mr. Chairman and Gentlemen,

Your obedient Servant,

G. H. PARKES,

Chief Sanitary Inspector.

## Housing.

### 1. *Inspection of dwelling-houses during the year :—*

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts	...      ...      ...      ...      ...      ...	319
(b) Number of inspections made for the purpose	...	510
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	...      ...      ...      ...	169
(b) Number of inspections made for the purpose	...	169
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...      ...      ...      ...	169
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	...      ...      ...      ...      ...      ...	150

### 2. *Remedy of Defects during the year without Service of formal Notice :—*

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	...      ...      ...	22
---	-----------------------	----

### 3. *Action under Statutory Powers during the year :—*

(a) Proceeding under section 9, 10, and 16 of the Housing Act, 1936 :—		
--	--	--

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	...      ...	Nil.
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—		

(a) By owners	...      ...      ...	Nil.
(b) By local authority in default of owners	...	Nil.

(b)	Proceeding under Public Health Acts :													
(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	...	...	...	...	...	...	...	...	...	...	...	150	
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices :—													
(a)	By owners	...	...	...	...	...	...	...	...	...	...	135		
(b)	By local authority in default of owners	...	...	...	...	...	...	...	...	...	...	Nil.		
(c)	Proceeding under section 11 and 13 of the Housing Act, 1936 :—													
(1)	Number of dwelling-houses in respect of which Demolition Orders were made	...	...	...	...	...	...	...	...	...	...	169		
(2)	Number of dwelling-houses demolished in pursuance of Demolition Orders	...	...	...	...	...	...	...	...	...	...	60		
(d)	Proceeding under Section 12 of the Housing Act, 1936 :—													
(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	...	...	...	...	...	...	...	...	...	...	Nil.		
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or the room having been rendered fit	...	...	...	...	...	...	...	...	...	...	Nil.		
4.	<i>Housing Act, 1935—Overcrowding.</i>													
(a)	(i) Number of dwellings overcrowded at end of the year	...	...	...	...	...	...	...	...	...	...	460		
	(ii) Number of families dwelling therein	...	...	...	...	...	...	...	...	...	...	515		
	(iii) Number of persons dwelling therein	...	...	...	...	...	...	...	...	...	...	3,372		
(b)	Number of new cases of overcrowding reported during the year	...	...	...	...	...	...	...	...	...	...	15		

(c) (i)	Number of cases of overcrowding relieved during the year	...	...	...	...	...	102
(ii)	Number of persons concerned in such cases	...					666
(d)	Particulars of any cases in which dwelling houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	...	...	...	...	...	Nil.
	Total number of houses demolished by Owners	...	...				89

### Overcrowding.

The permitted numbers of new houses are obtained from the Surveyor's plans.

Measurements of all the working class houses in the district were completed during the year.

The total number of houses found to be overcrowded at the time of the survey was 545, and of this number it was anticipated that 107 cases would be dealt with under the Slum Clearance Programme, and that Private Enterprise would in a measure contribute to the relief of such cases. The fact that a house may become uncrowded through the death or marriage of one of its members was kept in mind.

15 houses have become overerowded through natural causes, viz. :—Birth, and children reaching the age of ten years. These affect 15 families and 87 persons.

The majority of cases abated have been due to the provision of Council houses at Woodcross for the purpose.

The difficulties—resulting in refusals to move—have been :—

1. The distance from their present dwelling and possibly from the place of employment.
2. The rent, alleged to be in excess of the family means.

It has been found very difficult to arrange any exchange by agreement with private owners or agents.

The practicability of carrying out the Act to the best advantage depends upon a certain amount of give and take. As in almost all Housing Schemes the families involved may have to move from their present neighbourhood, although one would imagine that compensation—in the form of a new house—would be adequate.

Still the fact remains that some cases will make the minimum of effort on their own part while expecting the maximum from everyone else.

### Housing.

Satisfactory progress has been made during the year and a report from the Housing Architect (J. Percy Clark, Esq., F.R.I.B.A.) is given later.

126 houses were represented comprising 69 recommended to be dealt with in Areas and 57 as individuals.

The number of houses dealt with was 169, consisting of 112 in Areas and 57 individuals.

Inquiries were held as follows :—

1. Prestons Row, Victoria Street, Ladymoor Road No. 1. Parkes Hall Road, Littleton Row, on October 6th, 1937, by A. Archer Betham, Esq., F.R.I.B.A.
2. Brierley Lane, Dock Meadow, Hallgreen Street, Bissell Street, Pear Tree Lane, on December 15th, 1937, by A. S. Iggleston, Esq., F.R.I.B.A.

The former comprising 52 and the latter 60 houses, the results of these inquiries were not available at the end of the year.

Three Meetings of the Housing and Town Planning Committee were held in the course of the year to deal with houses represented under Section 11 of the 1936 Housing Act.

57 houses were considered at these Committees and of these demolition orders were made on 35. The remaining 22 were dealt with otherwise.

Towards the end of the year an additional programme of approximately 200 houses was submitted to the Council.

## Individual Houses.

The results obtained from invoking Section 11 of the 1936 Housing Act have been disappointing. The criterion of success would seem to be whether or not houses represented as being unfit for human habitation were rendered so fit in accordance with the conditions regarded as satisfactory by the Local Authority, and in the light of our experience satisfactory results have been by no means the rule.

List of houses that have been demolished during the year, due to Demolition Orders :—

Address.				No. of Houses.	No. of Persons
Nos. 6-25, Rose Street	...	...	...	14	70
Nos. 80, 81, Moor Street	...	...	...	2	16
Nos. 82-88, Broad Lanes	...	...	...	7	19
Nos. 1-17, Bissell Terrace	...	...	...	8	42
Nos. 21, 22, Woottons Square	...	...	...	2	8
Nos. 4-9, Bradleys Lane	...	...	...	6	29
Nos. 1-7, Long Row	...	...	...	7	27
Nos. 10-23, Fountain Lane	...	...	...	9	65
Nos. 1-5, Batmans Hill	...	...	...	5	39
Nos. 12-14, Victoria Street	...	...	...	3	24
Nos. 18, 63, 64/65, 66/67, Ash Street	...	...	...	4	15
Nos. 46, 47, Earl Street	...	...	...	2	6
Nos. 3, 4, Summerhouse Road	...	...	...	2	11
Nos. 30a, 31, Parkfield Colliery	...	...	...	2	6
Nos. 41, 41a, Bloomfield Road	...	...	...	2	7
Nos. 1, 2, Vernon Street	...	...	...	2	3
Nos. 3, 7, Havaacre Lane	...	...	...	2	13
Nos. 1, 2, High Street	...	...	...	2	10
Nos. 32-34, Mill Street	...	...	...	3	15
No. 33, Ebenezer Street	...	...	...	1	8
No. 1, Private Road	...	...	...	1	6
No. 9, Albert Street	...	...	...	1	12
Blue Button Cottage	...	...	...	1	4
No. 60, Foundry Street	...	...	...	1	4
				—	—
			Totals	89	495
				—	—

## Re-Housing.

Sites have been planned and will be developed at Princes End, Chad Road and Rookery Road, and dispossessed Slum Clearance tenants will have prior claim on the majority of these houses.

The provision of dwellings for aged people has been mentioned in Council during the year, and, as we suggested in last year's report, this is a serious matter.

One or two persons, whether they be old or not, displaced from their dwellings, very naturally evince no great signs of gratitude when provided with a new house in excess of their desires both from the point of view of rent and accommodation. The Council on the other hand stand to lose by the possibility of the houses they provide not being efficiently maintained by tenants such as these.

While the case of old people is, perhaps, hardest, small dwellings would solve a problem embracing not only the old.

## Caravans.

A certain type of caravan dweller is an occasional and unwelcome visitor to our District. The problem is to secure a speedy removal of these dwellings, even where a nuisance is held by us to exist. The provisions of the 1936 Public Health Act in this regard, should in time make themselves felt, but in a District where space exists upon which these people settle it is likely to be some time before a really satisfactory state of affairs will be reached. The difficulty of dealing with this type of case is often not fully realised.

## Housing.

### Report of the Housing Architect (J. Percy Clark, Esq., F.R.I.B.A.)

During the year approximately 246 houses were built, consisting of 66 for Slum Clearance at Princes End, and 52 for Slum Clearance, 78 for relief of Overcrowding, and 50 for Economic Rentals at Woodcross.

A further 16 houses for relief of Overcrowding were completed early in the present year.

Several schemes were also prepared, during 1937, details of which are given below :—

		Slum Clearance.	Over-crowding.	Economic Rentals.	Total
Chad Road Site	...	76	—	32	108
Princes End Site	Rd. No. 9 ...	24	14	—	38
Do.	Rd. No. 2 ...	78	—	30	108
Rookery Road Site	...	18	—	—	18
Batman's Hill Site	...	80	14	—	94

Each of the above schemes have been approved by the Ministry of Health, and the Layout for 38 houses at Princes End will be commenced early in 1938, and followed by the scheme for 108 at the same site. The schemes for Chad Road, Batman's Hill and Rookery Road will also be proceeded with during the year 1938.

### SECTION E.

#### Inspection and Supervision of Food.

Cowsheds and milkshops in the district are visited by the Sanitary Inspectors, who are also responsible for meat inspection.

Particulars are given on pages 33, 35, 36 & 37.

#### Food and Drugs—Adulteration Act, 1928.

Details of the sampling results on page 48 have been kindly supplied by Mr. Butlin, Chief Inspector of the County Council for this purpose of the Act.

TABLE B.

#### Food and Drugs (Adulteration) Act, 1928.

Details of Samples taken in Coseley Urban District during 1937.

Article of Food.	Number of Samples.	Genuine.	Adulterated.
Milk ... ... ...	15	13	2
General Foods ...	12	12	—

Two samples of milk were found to be slightly deficient in fat, and the vendors were cautioned.

COSELEY URBAN DISTRICT COUNCIL.

Undesignated Samples.

Number of samples submitted.		Cleanliness.						Tuberculous Samples.					
		Satisfactory.			Unsatisfactory.								
		Produced.		Produced.		Produced.							
In County.	Out of County.	In County.	Out of County.	In County.	Out of County.	In County.	Out of County.	Submitted	Positive	Out of County.			
8	-	-	-	-	-	1	1	8	1	-			

Specially Designated Milk.

Tuberculin Tested.		Accredited.						Pasteurised.		
		Cleanliness.			T.B.					
Cleanliness.	T.B.	Unsatisfactory.	Satisfactory.	Neg.	Pos.	Neg.	Pos.	Satisfactory.	Unsatisfactory.	T.B.
Satisfactory	Unsatisfactory	Unsatisfactory.	Satisfactory.	Neg.	Pos.	-	-	-	-	Failed.
1	-	1	-	-	-	-	-	1	-	Passed.

In addition 1 sample of " Sterilized " milk was taken during the year and on examination was found to be satisfactory.

## SECTION F.

### Prevalence of and Control Over Infectious and Other Disease.

#### Notifications.

The total number of cases of Infectious Diseases, excluding Tuberculosis, notified during the year was 157, composed of 99 males and 58 females.

The individual totals are appended below and are also given with the age incidence in Table VIII., p. 62.

Pneumonia—all forms	...	...	...	71
Diphtheria	...	...	...	41
Scarlet Fever	...	...	...	17
Erysipelas	...	...	...	17
Cerebro Spinal Fever	...	...	...	2
Puerperal Pyrexia	...	...	...	2
Ophthalmia Neonatorum	...	...	...	2
Encephalitis Lethargica	...	...	...	2
Dysentery	...	...	...	1
Enteric Fever	...	...	...	1
Puerperal Fever	...	...	...	1

Scarlet Fever notifications have again dropped still further from 54 to 17, while no deaths from this disease have been recorded.

The main feature as compared with last year is the notification of two cases of Encephalitis Lethargica and one case of Typhoid.

School notifications of infectious diseases are received and investigated weekly and prove of value when assessing the numbers of non-notifiable diseases.

**Deaths.** See Table IX., p. 63.

Among the notifiable diseases Pneumonia accounted for 35 deaths against 33 in 1936. Diphtheria caused two as compared with five last year.

Encephalitis Lethargica was certified as causing two deaths, and Cerebro Spinal Fever as being responsible for one.

Table IV., p. 59 presents figures for the country as a whole while Table VII., p. 61 shows the Coseley figures for preceding years.

## Hospitalisation of Cases.

Table X., p. 64 presents details.

No accurate figures relative to Pneumonia cases are available.

## Age Groups and Seasonal Incidence.

Reference to Tables IX., p. 63 and XI., p. 64 will provide information on these points.

## Hospital Treatment.

It has been reported from time to time that the available accommodation is inadequate and the provision of a suitable hospital again came forward for consideration. Repeated discussions between interested parties culminated towards the end of the year in the Council making application to the Ministry of Health for an order under the 1936 Public Health Act, to make certain districts into a united district under a Joint Board.

Hospital treatment of certain cases of non-notifiable infectious diseases, *e.g.*, Measles, Whooping Cough, should be regarded as essential, while something should also be done to place the position of Erysipelas on a more definite basis. It is practically impossible locally to secure Isolation Hospital treatment for any cases suffering from this latter disease, and while in many cases it may not be essential to hospitalise such patients, yet, so long as it remains a notifiable infectious disease, some provision must be made for its treatment.

## Vaccination.

Figures kindly supplied by Mr. A. J. Parkes, Vaccination Officer, show the position during 1937 to have been as follows:—

No. of Births, 1st of January to 31st December, 1937—	401.
„ „ Successful Vaccinations during the year	56
„ „ Insusceptibility ... ... ...	—
„ „ Statutory Declarations ... ... ...	291
„ „ Deaths unvaccinated ... ... ...	15
„ „ Postponements ... ... ...	18
„ „ Removals not found ... ... ...	21
	—
	401

Comment on certain of the diseases is made below.

## Smallpox.

No cases occurred during the period under review.

## Scarlet Fever.

The cases numbered 17 vice 54, no deaths occurred and of the notified cases 9 were removed to hospital. The average stay in hospital was 34 days.

## Diphtheria.

The number of notifications received—41, is a decrease of two on last year, while two deaths were recorded.

38 cases were admitted to hospital.

One of the fatal cases is worthy of special comment. The child was admitted to hospital with a vague illness and while there developed a discharging ear, which when swabbed gave a positive result for K.L.B. The child subsequently died, the cause being certified as toxæmia following Diphtheria. The organisms were not examined for virulence.

It is essential that every sore throat should be investigated by an expert and until the dangers of negligence in this matter are appreciated, there is little likelihood of Diphtheria fatalities being avoided.

The average stay in hospital was 38 days.

## Diphtheria Antitoxin.

A supply is always kept available for use by local practitioners.

## Diphtheria Immunisation.

A Scheme, details of which are supplied below, was presented and approved by the Committee and will be put into operation early next year.

The co-operation of all local practitioners was sought and it is earnestly to be hoped that the result will be the protection of a number of children sufficient materially to affect the incidence of the disease. It has been reported to the Committee that unless a large percentage of children are dealt with, epidemic incidence will not be affected—although children immunised nevertheless occupy a favourable position.

## Diphtheria Immunisation Scheme.

### The Schick Test.

Is the established method of ascertaining whether or not a person is likely to contract Diphtheria.

A very small injection is made into the skin of the arm and the subsequent re-action—harmless to the patient—is assessed by the Medical Officer.

The vast majority of children under five *are* susceptible to Diphtheria and so Schick Testing is not essential as a preliminary.

After immunisation Schick Testing is very helpful in showing whether or not the protection given is wholly satisfactory.

### Immunisation Procedure.

A few drops of the preparation are injected under the skin—usually of the upper arm—on one to three occasions.

The actual number depends upon a diversity of circumstances, e.g., the age of the child.

No serious or lasting ill effects can be anticipated and any discomfort which may follow will be of a transitory nature.

### Cost.

The average cost per child in the methods proposed would be 1/9—4/-. This latter figure would be for special cases in younger children, older children and adults, and both figures include a Schick Test (cost 3d. approx.) after immunisation.

The approximate under five population of Coseley is 2,200, and while the response to such a scheme cannot be anticipated with any certainty—the cost is not likely to be unduly high.

Children may be immunised by their own private medical attendants and the latter will receive the immunising material free of charge.

## Principal Infectious Disease Notifications shown in Wards.

Disease.	WARDS.					Total.
	High-fields.	Hurst Hill.	South East.	Spring-vale.	West Central.	
Diphtheria ...	17	5	13	2	4	41
Scarlet Fever	2	2	2	2	9	17
Pneumonia ...	9	22	18	8	14	71
Tuberculosis...	7	6	8	7	7	35
Erysipelas ...	4	4	3	1	5	17
Total ...	39	39	44	20	39	181

### Enteric Fever.

One case was notified during the year the sufferer being a female of 22. Hospital treatment was secured in Wolverhampton and the patient made a good recovery. Detailed inquiry did not reveal any source of infection and examination of all contacts proved negative.

### Puerperal Fever and Pyrexia.

Two cases of Puerperal Fever and one case of Puerperal Pyrexia were notified, one death resulting.

Each case is investigated to ascertain any possible source such as the occurrence of sore throats or illness in the home about the time of the confinement. No positive results have yet been obtained from these inquiries.

### Cost.

The cost of Infectious Disease treatment for the year was £823 15s. 2d.

The cost of hospital treatment for Puerperal Pyrexia was £20 5s. 0d.

### Pneumonia.

The number of fatal cases which had not been notified was 25, so that it is very difficult to make any serious deduction so far as the incidence of this disease is concerned.

Males as compared with females were attacked in the ratio of 50 : 21, and the main age group was 45 to 65 years.

23 cases were notified as Lobar Pneumonia, 15 as Acute Primary Pneumonia, 13 as Acute Influenza Pneumonia, and 4 as Broncho Pneumonia.

The Case Death Rate appears very high but this is misleading as it would appear many cases are not notified at all.

### Influenza.

This was given as the cause of death in nine cases, although during the period under review no serious outbreak came to light, and the latitude of this term is evident.

### Erysipelas.

17 cases were notified and no deaths occurred.

### Cancer.

38 deaths were recorded, comprising 23 females and 15 males, three of these cases were under the age of 45, all being females.

Details of the parts affected will be found on page 67, Table XV.

### Prevention of Blindness.

Two cases of Ophthalmia Neonatorum were received. Both were mild and recovered without loss of vision.

### Measles.

202 cases of Measles with two deaths were ascertained during the year as compared with 128 cases and two deaths last year.

### Whooping Cough.

28 cases of Whooping Cough with three deaths were reported showing a large decrease in incidence but an increase in fatality as compared with last year.

These returns are obtained casually, from Health Visitors, Head Teachers and the School Nurse and are of necessity very approximate.

## Encephalitis Lethargica.

Two cases were notified, a female aged 3 and a male aged 45, both of which died.

## Cerebro Spinal Fever.

During the year a female aged 2 and a male aged 15 were notified as suffering from this disease, and of these the female died.

## Tuberculosis.

35 cases—16 males and 19 females—were notified as suffering from Tuberculosis.

The respective figures for last year were 14 and 10.

15 deaths were recorded as against 18 in the previous year. Details are given in Table XII., p. 65 and the number of deaths for the past five years is appended for information in Table XIII., p. 66.

The ratio of non-notified to the total tuberculosis deaths was 1 : 8.

A table is appended showing the interval between notification and deaths in fatal cases, where the disease had been previously notified.

Year.	Within one month.	From 1-3 mths.	From 3-6 mths.	From 6 mths - 1 yr.	From 1-2 yrs.	From 2-3 yrs.	From 4 yrs. and upwards.	Notified after death.	Total.
1937	—	1	2	2	2	3	3	2	15

No action was found necessary under the Public Health (Prevention of Tuberculosis) Regulation 1925 or under Section 62 of the Public Health Act, 1925.

## Environment.

The housing of Tubercular cases was examined in my last report and the provision of suitable surroundings is essential if any lasting impression is to be continued after discharge from Sanatorium.

It has been found possible during the year to offer abatement to certain overcrowded cases, but the value of this is lessened by reason of the families affected being unable to pay the rent for a new house, with the result that removal is often refused. It must be mentioned, however, that no great effort was made by one or two to take advantage of repeated efforts to assist.

I still consider that a certain number of Council houses on every new estate should be placed at the disposal of the Medical Officer of Health for cases deserving on health grounds of a change. Unless some such arrangements are made one feels that extensive re-housing developments are not being utilised to the full, as the placing of young families of Tubercular parents in an environment more inimical to the disease than that which at present they in many cases enjoy, would not only enable the resistance of the young members of the family to be raised but would also provide an excellent follow-up to any sanatorium treatment which may have been undergone by the patients themselves.

It might be mentioned that each case of Tuberculosis notified is classified so far as re-housing is concerned, with the following points receiving special consideration.

1. Is the family overcrowded ?
2. Is the case specially infectious ?
3. Are there any young children in the family ?
4. Is there more than one case in the family ?
5. Are their present circumstances satisfactory in other respects ?

### Home Visiting.

The number of Primary Visits paid by the Health Visitors during the year was 39, while 548 re-visits were also made, making a total of 587 in all.

### After Care Committee.

The Council are represented on the Staffordshire, Wolverhampton and Dudley Joint Board for Tuberculosis, and on the Wolverhampton and Dudley After Care Committee.

TABLE I.

## TOTAL DEATHS, 1937.

	Causes of Death.		Males.	Females.	Total
1.	Typhoid and Paratyphoid Fever	...	—	—	—
2.	Measles	...	1	1	2
3.	Scarlet Fever	...	—	—	—
4.	Whooping Cough	...	1	2	3
5.	Diphtheria	...	1	1	2
6.	Influenza	...	8	1	9
7.	Encephalitis Lethargica	...	1	1	2
8.	Cerebro-Spinal Fever	...	—	1	1
9.	Tuberculosis of Respiratory System	...	8	7	15
10.	Other Tuberculosis	...	—	—	—
11.	Syphilis	...	—	—	—
12.	General Paralysis of Insane, etc.	...	1	1	2
13.	Cancer	...	15	23	38
14.	Diabetes	...	—	3	3
15.	Cerebral Haemorrhage, etc.	...	11	11	22
16.	Heart Disease	...	33	27	60
17.	Aneurysm	...	—	—	—
18.	Other Circulatory Diseases	...	2	3	5
19.	Bronchitis	...	8	6	14
20.	Pneumonia (All Forms)	...	22	13	35
21.	Other Respiratory Diseases	...	2	—	2
22.	Peptic Ulcer	...	4	—	4
23.	Diarrhoea under 2 years	...	1	1	2
24.	Appendicitis	...	1	—	1
25.	Cirrhosis of Liver	...	1	—	1
26.	Other Liver Diseases	...	—	1	1
27.	Other Digestive Diseases	...	1	4	5
28.	Acute and Chronic Nephritis	...	4	2	6
29.	Puerperal Sepsis	...	—	1	1
30.	Other Puerperal Diseases	...	—	1	1
31.	Congenital Debility, Premature Birth, etc.	11	10	21	
32.	Senility	...	10	19	29
33.	Suicide	...	1	—	1
34.	Other Violence	...	6	2	8
35.	Other Defined Diseases	...	13	4	17
36.	Ill Defined or Not Known	...	—	—	—
37.	Diarrhoea 2 years and over	...	—	—	—
TOTALS		...	167	146	313

TABLE II.

## QUARTERLY SUMMARY OF DEATHS ARRANGED IN AGE-GROUPS.

AGE-GROUPS.	1st Qtr.		2nd Qtr.		3rd Qtr.		4th Qtr.		TOTALS.		Per- centa- ge
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Under 1 year ...	8	4	—	4	6	2	6	4	20	14	10.9
1-5 years ...	1	4	3	2	—	1	—	—	4	7	3.5
5-10 " ...	—	1	—	4	1	—	2	—	3	5	2.6
10-15 " ...	—	—	1	—	—	—	—	—	1	—	0.3
15-25 " ...	4	5	8	—	—	—	4	3	16	8	7.7
25-35 " ...	2	2	—	1	1	1	2	2	5	6	3.5
35-45 " ...	2	1	3	3	2	1	7	4	14	9	7.3
45-55 " ...	7	3	2	6	2	4	5	3	16	16	10.2
55-65 " ...	11	7	7	3	4	6	3	3	25	19	14.0
65-80 " ...	14	20	19	11	12	3	8	9	53	43	30.7
80 and over " ...	4	7	1	—	4	7	1	5	10	19	9.3
<b>TOTALS</b> ...	<b>53</b>	<b>54</b>	<b>44</b>	<b>34</b>	<b>32</b>	<b>25</b>	<b>38</b>	<b>33</b>	<b>167</b>	<b>146</b>	<b>100.0</b>

TABLE III.

## VITAL STATISTICS DURING 1928-1937.

YEAR.	Population Estimated to the Middle of each year.	Net Births.		Deaths belonging to District.			
		Number	Rate per 1,000 population	Under 1 year of age.	Number	Rate per 1,000 births.	Number
1928	25,220	517	20.5	34	65.76	285	11.3
1929	24,990	487	19.45	46	94.45	322	12.85
1930	25,480	525	21.7	31	59.0	295	11.8
1931	25,480	503	19.7	29	58.0	290	11.38
1932	25,480	464	18.2	48	103.4	307	12.05
1933	25,740	444	17.25	27	60.8	309	12.0
1934	26,060	462	18.3	19	41.1	269	10.3
1935	26,420	513	19.4	35	68.23	287	12.6
1936	27,460	547	19.9	47	85.92	317	13.38
1937	28,120	549	19.52	35	65.57	313	12.91
Average	26,045	501.1	19.39	35.1	70.22	299	12.05

TABLE IV.  
BIRTH-RATES, DEATH-RATES AND ANALYSIS OF MORTALITY  
FOR THE YEAR 1937.

	England and Wales.	125 County Boroughs and Great Towns including London	148 Smaller Towns (Resident Populations 25,000 to 50,000 at 1931 Census)	COSELEY.
Rates per 1,000 Population.				
Live Births	14.9	14.9	15.3	19.52
Still Births	0.60	0.67	0.64	0.99
<b>DEATHS.</b>				
All causes	12.4	12.5	11.9	12.91
Typhoid & Paratyphoid				
Fever	0.00	0.01	0.00	0.00
Smallpox	0.00	0.00	0.00	0.00
Measles	0.02	0.03	0.02	0.07
Scarlet Fever	0.01	0.01	0.01	0.00
Whooping Cough	0.04	0.04	0.03	0.10
Diphtheria	0.07	0.08	0.05	0.07
Influenza	0.45	0.39	0.42	0.32
Violence	0.54	0.45	0.42	0.28
Rates per 1,000 Live Births.				
Deaths under 1 year of age	58	62	55	65.75
Diarrhoea and Enteritis under 2 years of age	5.8	7.9	3.2	3.64
<b>MATERNAL MORTALITY.</b>				
Puerperal Sepsis	0.97	—	—	1.82
Others	2.26	—	—	1.82
Total	3.23	—	—	3.64
Rates per 1,000 Total Births (Live and Still)				
<b>MATERNAL MORTALITY.</b>				
Puerperal Sepsis	0.94	—	—	1.73
Others	2.17	—	—	1.73
Total	3.11	—	—	3.46

TABLE V.  
INFANT MORTALITY IN COSELEY DURING THE YEAR 1937.  
DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER ONE YEAR.

Cause of Death.	Under one week		1-2 weeks		2-3 weeks		3-4 weeks		Total under one month		1-3 mths.		3-6 mths.		6-9 mths.		9-12 mths.		Total deaths under one year.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Measles ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough...	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1
Scarlet Fever ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Diphtheria ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
T.B. Meningitis ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Abdominal T.B. ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other T.B. Diseases	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Meningitis(not T.B.)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Bronchitis...	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-
Pneumonia (All forms)	-	-	-	1	-	-	-	-	-	1	1	1	-	-	1	-	1	1	3	3
Other Respiratory Diseases.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-
Diarrhoea and Enteritis.	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	1	1
Convulsions ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Congenital Debility	3	1	-	-	-	-	-	1	3	2	1	1	-	-	-	-	-	-	-	4
Malformations ...	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1
Marasmus, etc. ...	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1
Violence ...	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-
Other Diseases ...	1	-	-	-	-	-	-	-	1	-	-	1	1	-	-	-	-	-	-	2
Prematurity ...	5	5	-	2	-	-	-	-	5	7	-	-	-	-	-	-	-	-	-	5
<b>TOTAL ...</b>	<b>9</b>	<b>6</b>	<b>-</b>	<b>3</b>	<b>-</b>	<b>-</b>	<b>1</b>	<b>9</b>	<b>10</b>	<b>5</b>	<b>3</b>	<b>3</b>	<b>-</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>20</b>	<b>15</b>	

TABLE VI.  
DEATHS IN INSTITUTIONS DURING 1937.

INSTITUTION.	MALES.				FEMALES.				TOTAL.			
	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.
Royal Hospital Wolverhampton	6	5	5	5	4	3	—	2	10	8	5	7
Women's Hospital Wolverhampton	—	—	—	—	2	3	1	—	2	3	1	—
Guest Hospital Dudley	—	—	—	3	—	—	3	—	—	—	3	3
Poor Law Institution 10 Burton Road	2	2	1	1	5	2	2	—	7	4	3	1
County Mental Hospital	1	1	—	2	—	—	—	—	1	1	—	2
Infectious Diseases Hospital	—	—	—	—	1	—	—	—	1	—	—	—
Sanatoria	—	1	—	—	1	—	—	—	1	1	—	1
Others	—	—	4	2	4	3	1	4	4	3	5	6
TOTALS	9	9	10	14	17	11	7	6	26	20	17	20
YEARLY	...	42			41					83		

TABLE VII.  
DEATHS FROM SPECIFIED INFECTIOUS DISEASES, 1928-1937.

DISEASE.	YEAR.									
	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937
Enteric Fever	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	1	—	—	—	2	1	—	—	—
Diphtheria	5	—	—	1	—	2	1	4	5	2
Whooping Cough	—	—	1	2	4	—	5	2	—	3
Measles	—	2	6	1	7	2	3	1	2	2
Diarrhoea (under 2 yrs.)	5	7	7	5	2	6	3	9	5	2
TOTALS	10	10	14	9	13	12	13	16	12	9

TABLE VIII.  
AGE-GROUPS OF INFECTIOUS DISEASES (EXCLUDING TUBERCULOSIS) NOTIFIED IN 1937.

TABLE IX.  
AGE GROUPS OF DEATHS FROM NOTIFIABLE DISEASES DURING 1937.

TABLE X.  
DISEASES NOTIFIED (EXCLUDING TUBERCULOSIS) DURING 1937.

DISEASE.		Total Cases Notified.	Admitted to Hospital.	Total Deaths.
Enteric Fever	...	1	1	1
Diphtheria	...	41	38	2
Scarlet Fever	...	17	9	—
Pneumonia	...	71	—	35
Erysipelas	...	17	1	—
Puerperal Fever	...	1	1	—
Puerperal Pyrexia	...	2	1	—
Ophthalmia Neonatorum	...	2	—	—
Cerebro-Spinal Meningitis	...	2	2	—
Encephalitis Lethargica	...	12	—	1
Dysentery	...	1	—	—
<b>TOTALS</b>	<b>...</b>	<b>157</b>	<b>53</b>	<b>40</b>

TABLE XI.  
MONTHLY NOTIFICATIONS OF INFECTIOUS DISEASES.

MONTH.	Diphtheria	Scarlet Fever	Erysipelas	Pneumonia	Ophthalmia Neonatorum	Puerperal Fever	Puerperal Pyrexia	Cerebro Spinal Meningitis	Enteric Fever	TOTALS.
January	1	1	3	12	5	—	—	—	—	18
February	1	1	3	1	1	—	—	—	—	15
March	1	1	1	12	3	1	1	—	—	13
April	1	1	4	12	3	—	—	—	—	12
May	1	1	1	12	2	—	—	—	—	10
June	1	1	1	12	2	—	—	—	—	9
July	1	1	1	12	3	4	—	—	—	8
August	1	1	1	12	3	—	—	—	—	7
September	1	1	1	12	3	—	—	—	—	6
October	1	1	1	12	3	—	—	—	—	5
November	1	1	1	12	3	—	—	—	—	4
December	1	1	1	12	3	—	—	—	—	3
<b>TOTALS</b>	<b>41</b>	<b>17</b>	<b>17</b>	<b>71</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>12</b>	<b>1</b>	<b>154</b>

TABLE XII.  
NEW CASES AND DEATHS FROM TUBERCULOSIS. 1937.

AGE GROUPS.	NEW CASES				DEATHS				TOTAL DEATHS.		
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary				
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.
0—1 Years	...	...	—	—	—	—	—	—	—	—	—
1—5	“	“	—	—	—	—	—	—	—	—	—
5—10	“	“	—	—	—	—	—	—	—	—	—
10—15	“	“	—	—	—	—	—	—	—	—	—
15—20	“	“	—	—	—	—	—	—	—	—	—
20—25	“	“	—	—	—	—	—	—	—	—	—
25—35	“	“	—	—	—	—	—	—	—	—	—
35—45	“	“	—	—	—	—	—	—	—	—	—
45—55	“	“	—	—	—	—	—	—	—	—	—
55—65	“	“	—	—	—	—	—	—	—	—	—
65 & Over	...	...	—	—	—	—	—	—	—	—	—
TOTALS	...	13	16	3	3	16	19	8	7	—	8
											7

TABLE XIII.  
DEATHS FROM TUBERCULOSIS DURING THE YEARS 1932-1937.

YEAR.	DEATHS.				TOTAL DEATHS.	
	Pulmonary		Non-Pulmonary		M.	F.
	M.	F.	M.	F.		
1932	8	8	—	1	8	9
1933	12	9	3	1	15	10
1934	18	6	—	—	18	6
1935	11	7	1	4	12	11
1936	10	7	—	1	10	8
1937	8	7	—	—	8	7

TABLE XIV.  
DEATHS ARRANGED ACCORDING TO MONTHS, 1937.

MONTH.	OUTSIDE DEATHS.		DEATHS OCCURRING IN THE AREA.		TOTAL DEATHS.	
	M.	F.	M.	F.	M.	F.
January	4	5	12	11	16	16
February	1	6	17	9	18	15
March	4	6	15	17	19	23
April	4	6	10	9	14	15
May	1	3	17	10	18	13
June	4	2	10	5	14	7
July	4	3	8	5	12	8
August	2	3	8	6	10	9
September	4	1	6	7	10	8
October	2	2	4	5	6	7
November	7	4	8	11	15	15
December	5	—	10	10	15	10
TOTALS	42	41	125	105	167	146

TABLE XV.  
CANCER DEATHS—AGE GROUPS AND PARTS AFFECTED.

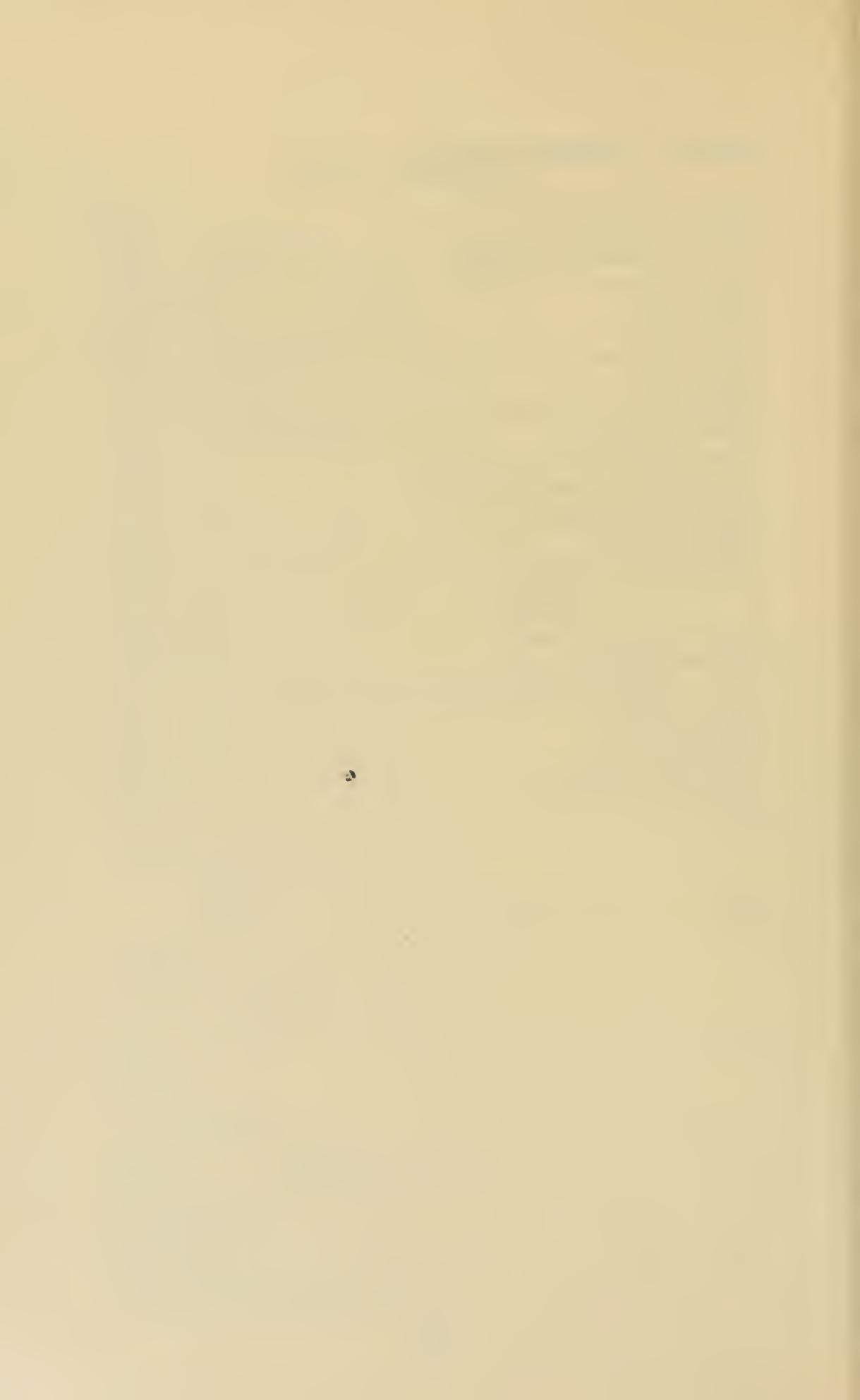
	1-15 years.		15-25 years.		25-35 years.		35-45 years.		45-65 years.		65 yrs. & over.		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Tongue, Lip, Mouth, etc. ...	—	—	—	—	—	—	—	—	2	—	—	—	2	—
Gullet ...	—	—	—	—	—	—	—	—	—	—	1	1	1	1
Stomach ...	—	—	—	1	—	—	—	—	2	1	3	2	5	4
Bowel or Abdomen	—	—	—	—	—	1	—	—	—	—	—	—	—	1
Rectum ...	—	—	—	—	—	—	—	—	—	—	2	1	2	1
Breast ...	—	—	—	—	—	—	—	1	—	2	—	1	—	4
Lung ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Womb or Ovaries	—	—	—	—	—	—	—	—	—	6	—	1	—	7
Ext. Genitals ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Liver, Kidney, etc.	—	—	—	—	—	—	—	—	1	2	2	2	3	4
Bones ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Heart ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Miscellaneous ...	—	—	—	—	—	—	—	—	—	—	2	1	2	1
<b>TOTALS</b> ...	—	—	—	1	—	1	—	1	5	11	10	9	15	23

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COSELEY URBAN DISTRICT COUNCIL.

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EDUCATION COMMITTEE.

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# ANNUAL REPORT

OF THE

## SCHOOL MEDICAL OFFICER

(JAMES GORMAN, M.B., Ch.B., D.P.H.)

FOR THE YEAR

# 1937

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COSELEY URBAN DISTRICT COUNCIL.  
EDUCATION COMMITTEE.

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*Vice-Chairman :*  
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of  
the Council.

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and  
Mrs. C. H. Waddell } Experienced in Elementary  
and Secondary Education  
for Girls.

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Mr. T. B. Davies } As persons specially  
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of Council Schools.

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COSELEY URBAN DISTRICT COUNCIL.  
EDUCATION COMMITTEE.

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# ANNUAL REPORT

OF THE

## School Medical Officer

JAMES GORMAN, M.B., Ch.B., D.P.H.)

FOR THE YEAR 1937.

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*To the Chairman and Members of the  
Coseley Education Committee.*

LADIES AND GENTLEMEN,

I have the honour to submit to you the Annual Report of the School Medical Service for the year 1937.

The end of the year saw the opening of the new Bayer Hall Clinic partly designed to accommodate certain branches of the School Medical Service, *e.g.*, Minor Ailments, Dental, and Ophthalmic Services. The fundamental result has been the provision of conditions which render efficient work an ideal much more facile of attainment.

Plans for the expansion of the School Dental Service and the holding of Ophthalmic Clinics were approved by the Committee and will, with the consent of the Board of Education, be put into operation early in the coming year.

The extensions predicted last year have thus been commenced and, while it is important to realise that so far as a complete service is concerned it is only a commencement, yet it may confidently be hoped that further proposals which will be laid before the Committee may prove similarly acceptable and ultimately result in a really comprehensive scheme.

The health of the children as revealed in the report shows certain features of interest.

There has been an increase in the defects noted in all age groups, but as usual, certain nose and throat conditions—not necessarily serious in character—account for a large percentage of the total.

Attendances at the Bayer Hall Minor Ailments Clinic have decreased but it is problematical whether this has any direct bearing upon the incidence of minor ailments.

Nutritional statistics show a marked general rise in the "A" or "Excellent" group, and the average was higher than in the previous year.

A regrettable feature of the statistics has been the increase in the cases of uncleanliness. The improvement of housing conditions might seem to encourage a similar rise in the standard of general hygiene but unfortunately in certain cases this would not prove to be so. That our district in regard to this matter occupies no singular position does not afford justification for omitting mention of the facts.

I would acknowledge my indebtedness to the Chairman and members of the Committee for their support.

I am appreciative of the assistance rendered by Mr. Poole—the Secretary for Education—and Dr. Waddell, while my staff have performed their duties in a thoroughly conscientious manner.

I am,

Ladies and Gentlemen,

Your obedient servant,

JAMES GORMAN.

TABLE A.

Incidence of Principal Defects Requiring Treatment at Medical Inspection in England and Wales (1936) and in Coseley (1937).

Disease.	Routine.				Specials.	
	Eng. & Wales		Coseley		Coseley	
	No. of defects.	Inc. per 1,000 inspections.	No. of defects.	Inc. per 1,000 inspections.	No. of defects.	Inc. per 1,000 inspections.
Skin Diseases ...	16,215	9.4	31	26.58	15	99.33
Defects of Vision*	87,659	76.3	99	84.90	15	99.33
Squint ...	13,334	7.7	27	23.15	5	33.11
Other Eye Diseases ...	11,776	6.8	13	11.14	5	33.11
Defects of Hearing ...	4,995	2.9	1	.085	—	—
Otitis Media ...	6,947	4.0	—	—	—	—
Chronic Tonsillitis ...	35,618	20.6	187	16.37	23	15.23
Adenoids Only ...	4,802	2.8	3	2.57	1	6.62
Chronic Tonsillitis and Adenoids ...	34,657	20.1	20	17.15	2	13.24
Other Nose and Throat Defects ...	11,407	6.6	4	3.43	10	66.22
Defects of Speech ...	2,284	1.3	1	.085	—	—
Organic Heart Disease ...	2,790	1.6	—	—	—	—
Pulmonary Tuberculosis :						
(a) Definite ...	163	0.1	—	—	1	6.62
(b) Suspected ...	723	0.4	5	4.28	6	39.73
Non-Pulmonary T.B. ...	919	0.5	—	—	—	—
Epilepsy ...	412	0.2	—	—	—	—
Chorea ...	826	0.5	3	2.57	1	6.62
Other Nervous Conditions	2,327	1.3	4	3.43	1	6.62
Deformities :						
Rickets ...	2,015	1.2	6	5.14	—	—
Spinal ...	4,289	2.5	1	.085	1	6.62
Other Forms ...	14,238	8.2	19	16.29	1	6.62

\* In calculating this figure, entrants have been left out of account.

## Staff.

The School Medical Staff is as follows :—

### *School Medical Officer and Medical Officer of Health :*

JAMES GORMAN, M.B., Ch.B., D.P.H.

### *Hon. Consultant and Deputy S.M.O. and M.O.H. :*

C. HOPE WADDELL, L.R.C.P.I., L.R.C.S.I., L.M.

### *School Dentists : Part Time.*

W. G. WEBSTER, L.D.S., Eng.      }  
C. H. MERRY, L.D.S., B'ham.      }  
B. H. MOORE, L.D.S., B'ham.      }

### *School Nurse :*

MISS M. RUSSELL.

### *Clerkess :*

MISS D. TURTON.

## Co-ordination.

The appointments of Medical Officer of Health and School Medical Officer being held by the same person results in an easy maintenance of supervision from the pre-school to school life.

## School Hygiene.

A site has been acquired for the replacement of Lanesfield School and this will effect an urgent improvement.

Certain minor defects were reported as a result of routine inspection in the course of the year.

I would urge that the lime washing of Sanitary conveniences be carried out at intervals of not more than one year.

The following works were carried out during the year :—

<i>St. Mary's Infants'.</i>	Painted and decorated internally.
<i>West Coseley.</i>	Playground re-surfaced.
<i>Daisy Bank Junior.</i>	Roof repaired.
<i>Mt. Pleasant Senior.</i>	Roof repaired.

## Washing and Drinking Facilities.

Three new wash basins were provided at Daisy Bank Infants' School during the year.

The provision of drinking fountains at schools not so provided is a matter which should receive attention.

## Heating and Lighting.

A new Bungalow range has been fitted in Parkfield Infants' School and the Lanesfield heating apparatus has been improved by the addition of an electric accelerator.

The lighting in certain of the non-provided schools is inadequate and calls for immediate improvement. Unless a high standard of illumination is provided it seems to me unreasonable to expect any child to obtain the fullest educational gain without the expenditure of unnecessary effort.

## Medical Inspection.

The following groups of children were examined :—

1. Entrants (over 5 years).
2. Intermediates (8-9 years).
3. Leavers (over 12 years).
4. Special Examinations.

Children found to be suffering from any defect whether ascertained at the routine group inspections or in any other manner, may be referred to the Special Clinic held once weekly by the School Medical Officer at Bayer Hall.

## Findings at Medical Inspections.

### Routine Inspections.

The numbers of children examined were as follows :—

Entrants 373. Intermediates 360. Leavers 433.  
Total 1,166.

The findings will be noted in Table 1C (Page 23) at the end of the report.

The percentage of defects requiring treatment—excluding uncleanliness and dental diseases—in the various groups from 1932—1937 are appended below for purpose of comparison.

TABLE B.

	1937	1936	1935	1934	1933	1932
Entrants ...	51.20	44.92	32.75	34.71	32.40	36.42
Intermediates ...	55.55	39.21	43.59	43.51	48.09	39.44
Leavers ...	42.49	31.51	36.16	40.42	37.90	36.33
All Groups ...	44.16	38.43	37.37	39.58	38.90	37.42

Comment has already been made on the increased number of defects ascertained and requiring treatment.

### Special Examinations.

These numbered 151 and with 467 re-examinations totalled 618.

### Nutrition.

The average standard was good and the percentage of "A" or "Excellent" children was higher than before.

An interesting feature is the small group of children in the "C" class who apparently enjoy all the advantages which are commonly regarded as rendering physical well-being easy and who in spite of this fail to attain normal nutritional standards. The same children are seen at Toddlers clinics and in many cases have been under periodic medical supervision since birth. Economically there is no hardship, diet has followed careful lines, rest receives due attention, obvious defects obtain immediate care and yet the child does not progress as do his companions. In some of these cases there is manifest a lessened resistance to infections--often of a respiratory type--but in others there is an unblemished history.

One wonders whether the anxiety naturally bestowed on these children by their parents and relatives does not produce an effect opposite to that which is intended.

### Visual Defects and External Eye Diseases.

Routine visual testing is confined to the Intermediates and Leavers groups but abnormality in any child is dealt with whenever ascertained.

99 cases of visual defect--excluding squint--were discovered at Routine Inspection and 15 cases at Special Inspections.

The figures for last year were 66 and 4 respectively.

27 cases of squint were found at routine inspections.

76 cases of error of refraction were discovered during the year--treatment being provided for 35 of these under the Committee's scheme and 41 being dealt with otherwise.

Spectacles were prescribed for and obtained by 74 children. The Education Committee arranged for 35 of these children.

It will be seen that the numbers of cases of visual defect have risen as against last year, and it is disturbing to find that in some cases the closest follow up work is required to ensure that the

necessary specialist examination is obtained. Failure to wear the glasses prescribed is not infrequently encountered and in these cases any accident to their glasses is interpreted as a clear indication that the latter had outlived their usefulness but need not be replaced. The child at school relies upon his parent in these matters but having left school he may—if his vision is neglected—wonder whether his trust was misplaced.

### **Ear Diseases and Defective Hearing.**

1 case of defective hearing was ascertained at Routine Medical Inspection.

4 cases of ear disease other than as above were found at Routine Inspection and required treatment.

31 children required treatment at Bayer Hall for minor ailments affecting the ear.

In view of the frequency of adenoids and unhealthy tonsils there is bound to be a waiting period of uncertain length before the cases can be treated and this cannot but be detrimental to the health of the children concerned. The position could be improved by the adoption of a scheme for the treatment of these conditions and this I advocated in my Annual Report for last year.

### **Uncleanliness. See Table VI. (Page 35).**

The figures are an increase on last year and have been commented upon already. It is interesting to note that this subject was discussed in detail in the Annual Report for 1909 and one conclusion remarked then is none the less true to-day, *i.e.*, "The persistently neglected child should be dealt with first." This is the principle which actuates prosecutions—a step most distasteful to everyone.

The School Nurse has, during the past year, devoted much more time to the task of securing the speedy return to school—in a fit state—of children excluded at cleanliness inspections. This time is in a sense unproductive so far as the vast majority of parents are concerned and cannot be allowed to increase indefinitely since the responsibility rests primarily with the parents of the affected children.

### **Minor Ailments and Skin Diseases.**

The arrangements remain unaltered and the figures for the past three years are given hereunder (see also Table IV., Page 34).

TABLE C.

Work done in connection with Bayer Hall Clinic, Year ended December, 1937.

No. of Sessions ... 126.

	Boys.	Girls.	Total.
No. of Children attended ... ... ...	525	438	963
No. of Children treated ... ... ...	498	405	903
Re-attendances ... ... ...	351	306	657
Total attendances and re-attendances ...	876	744	1,620
Defects Found ...	Boys.	Girls.	Total.
Ringworm :—			
Scalp ... ... ... ...	3	—	3
Body ... ... ... ...	2	5	7
Scabies ... ... ... ...	2	5	7
Impetigo ... ... ... ...	343	221	564
Other Skin Diseases ... ... ... ...	87	62	149
Minor Eye Defects ... ... ... ...	23	20	43
Minor Ear Defects ... ... ... ...	17	14	31
Miscellaneous (e.g., Minor Injuries, Burns and Scalds, other Septic Conditions) ...	102	87	189
Totals ...	579	414	993

Ringworm of the body provided 7 cases, and Scabies 7 cases, while 149 cases fell into the miscellaneous group of Skin Diseases.

### Dental Defects.

#### Report of the School Dentist.

The work for the past year has again followed along lines similar to previous years.

The rate of children treated to those found to require treatment is again very high, being 419 out of 476, or 88%.

The amount of conservative work has again been very small, for the reasons stated in previous years, but high hopes are being entertained that this very serious deficiency will be remedied with the commencement of work in the Bayer Hall Clinic, and the extension of the present scheme.

May I thank the School Medical Officer, and Nursing Staff for their co-operation, and help throughout the year.

(Signed) W. G. WEBSTER, L.D.S., Eng.  
Surgeon Dentist.

TABLE D.  
Dental Clinic Figures.

				Number.	Percentage
No. of Notices sent to Parents ...	...	...	...	476	—
No. of Children attended ...	...	...	...	451	94.70
No. of Parents attended with Children ...	...	...	...	419	92.90
No. of Cases paid for ...	...	...	...	324	—
Amount Received £8 2s. 0d.					

The revised scheme will now include the routine inspection and treatment of the 5, 6, and 7 year olds with certain leavers and casnals. Provision has been made for Anaesthetic sessions.

This is regarded as a preliminary stage towards a scheme which may require the services of a whole time dental surgeon.

It will not be possible with the one school nurse on the staff to allow her progressively to increase the time devoted to attendance upon the Dental Surgeon and the question of staff must be borne in mind when extensions are contemplated.

### Crippled Children.

15 children of this class are at present in our area.

13 of these attend a Public Elementary school and two do not attend any school.

Orthopaedic and postural defects accounted for the attendance and treatment—non-residential—of 20 children at an orthopaedic clinic.

No organised orthopaedic scheme exists in Coseley.

### Children with Heart Disease.

21 children are noted as above.

16 of these attend Public Elementary schools and 5 do not attend school at all.

A close watch is kept on these children, special instructions being issued to the Head Teacher concerning them and inspection of them being made from time to time. Where a private medical practitioner is attending his wishes are solicited before any action is taken.

## **Tuberculous Children.**

### *Pulmonary Cases.*

8 such children are at present on our list and of these 6 attend Public Elementary schools, while 1 is at an Institution, and 1 does not attend any school.

1 case was ascertained during the year and a further 11 cases are under observation as suspects.

### *Non-Pulmonary Cases.*

5 cases are known to us.

3 of these children attend Public Elementary schools, and 2 are at present in institutions.

Close touch is kept with these cases by means of home visiting, and also through the Tuberculosis Officers at Wolverhampton and Dudley Dispensaries controlled by the Staffs., Wolverhampton and Dudley Joint Board for Tuberculosis.

## **Multiple Defects.**

Three cases of this nature were noted during the year.

One suffers from Mental Defect and Crippling.

Two suffer from Mental Defect and Epilepsy.

One child is in an institution and one attends an Occupation Centre under the control of the Staffordshire Association for Mental Welfare.

## **Delicate Children.**

61 such children are in our area and of these 59 attend Public Elementary Schools and two do not attend school.

## **Follow Up Work.**

This branch of the service is efficiently carried out as the following table of the work performed by the School Nurse indicates :—

Visits to Schools for " Routine " Inspections	...	84
Other visits to Schools	...	116
Follow up domiciliary visits	...	832
Minor Ailments Clinics	...	126
Dental Clinics	...	55

## Arrangements for Treatment.

The Dental Service extension has been noted.

Mr. H. Campbell Orr, F.R.F.P.S., has been appointed to hold one Ophthalmic clinic approximately every three weeks and provision was made for this in the planning of the new Bayer Hall centre.

My best thanks are due to the staffs of the Royal and Eye Hospitals, Wolverhampton and the Guest Hospital, Dudley and to the area Tuberculosis Officers for their assistance.

## Infectious Diseases—Notifiable.

Table E shows the number of cases of Infectious disease notified to the Medical Officer of Health as occurring in children between 5 and 15 years during 1937.

TABLE E.

Infectious Diseases Notified during 1937 to the Medical Officer of Health.

5—15 years.

	YEARS.					
	5—10		10—15		Totals.	
	M.	F.	M.	F.	M.	F.
Diphtheria	...	...	12	3	4	5
Scarlet Fever	...	...	5	5	2	1
Pneumonia	...	...	7	—	1	1
Non-Pulmonary T.B.	...	...	—	—	—	—
Pulmonary T.B.	...	...	—	—	—	—
Erysipelas	...	...	—	—	—	—
Meningococcal Meningitis	...	—	—	—	—	—
Encephalitis Lethargica	...	—	—	—	—	—
Dysentery	...	...	—	—	1	—
Acute Poliomyelitis	...	...	—	—	—	—
Totals		24	8	8	8	32
						16

There has been a small rise in the number of Diphtheria cases but Scarlet Fever has attacked fewer children than last year.

The practice of regarding all doubtful cases as infections until—by medical opinion—they are proved otherwise is less common but has much more to commend it than the alternative of giving unlimited freedom to such cases to disseminate disease until the seeking of medical aid is practically forced upon the responsible parties.

I hope that in the coming year facilities will be made available for at anyrate the younger school children to receive protection against Diphtheria.

### Non-Notifiable Infectious Diseases.

The following figures must be regarded as approximate only, being taken from weekly returns made by the Head Teachers, and unconfirmed in many cases by Medical Certification.

TABLE F.

List of Infectious Diseases Notified by Head Teachers from each School.

School.	Scarlet Fever	Diphtheria	Measles.	Whooping Cough	Chicken Pox	Mumps	Skin Diseases.
Daisy Bank Junior ...	1	4	1	—	16	—	1
Daisy Bank Infants ...	—	3	20	—	35	—	8
Mt. Pleasant Senior ...	—	1	—	—	1	—	1
Mt. Pleasant Junior ...	—	1	12	—	9	3	1
Hurst Hill Junior ...	1	1	5	8	1	2	—
Hurst Hill Infants ...	2	—	30	5	35	8	1
Broad Lanes Senior ...	1	1	2	—	5	3	3
Broad Lanes Infants ...	—	—	7	9	20	—	1
Lanesfield Junior ...	—	1	30	—	42	1	2
Parkfield Infants ...	1	—	6	—	19	—	3
Christ Church Junior ...	—	4	—	—	7	—	4
Christ Church Infants ...	1	2	51	3	37	3	—
St. Mary's Junior ...	—	—	—	—	9	2	1
St. Mary's Infants ...	—	1	33	2	15	—	4
West Coseley Infants ...	1	—	2	—	—	—	—
Manor Senior Boys' ...	2	1	—	—	3	1	—
Manor Senior Girls' ...	—	1	3	1	8	1	—
Totals	10	21	202	28	262	24	30

The figures as compared with last year show a marked rise in the incidence of Measles and Chickenpox offset by a similar reduction in the cases of Whooping Cough and Mumps.

### Open Air Education.

No facilities exist and in view of the increasing number of delicate children in the list it would be well to keep this fact in mind and to take advantage of any opportunity which might present itself to better the position.

## Physical Training.

A report from the organisers is appended herewith.

Pioneer work in Physical Training over a period of about 30 years, has justified itself in the present general recognition of the national importance of the subject.

In the early part of the year the Government's White Paper was issued, and in July, the Physical Training and Recreation Act (1937), was passed. This has made it possible to draw together for equal recognition all types of activities, such as gymnastics "Keep-Fit," games, athletics, swimming, dancing, skipping, boxing, wrestling, camping, cycling, and hiking, etc., thus giving a breadth of meaning not formerly attributed to the term "Physical Training." With close co-operation between Local Education Authorities, and Voluntary Organisations along the lines suggested in the Government's memorandum, it is hoped that any individual so disposed, will now have the opportunity of unbroken participation in comprehensive physical training throughout life.

Where previously, plans for buying land for building Community Centres, etc., have failed owing to the financial difficulties involved, grants for approved schemes are now available under certain conditions.

In the Physical Training report of 1935 the following recommendations were made for consideration and application :—

1. The minimum time for physical education in the curriculum of the schools.
2. The provision of necessary equipment and apparatus for schools.
- 3a. Provision of indoor accommodation in Infant and Junior schools.
- 3b. Provision of fully equipped gymnasiums for all Senior Schools.
4. The acquisition and upkeep of playing fields, and provision of equipment for use thereon.
5. The provision of Swimming Baths to give a two year's course of swimming instruction in all Senior Schools.
6. Provision of clothing for physical training lessons.

Whilst it is gratifying that some progress has been made so far as numbers 1 and 2 are concerned, it is hoped that the consideration due to the other enumerated points, will be given in the near future.

### *Clothing.*

In the report of 1936, with reference to the Board of Education's circular 1450, the matter of suitable clothing was amplified, and we would again urge the importance of its early consideration.

We would suggest that a useful beginning could be made by supplying light and flexible footwear (without heels) throughout the school, leaving the supply of special dress to a later date. Although some progress in this matter of clothing has been evident during the last 2 years, it is thought that there is still room for improvement. Until such time that a full change of kit is available, children should be encouraged to remove superfluous clothing. Secure in the knowledge that the activity of the lesson will keep them warm, any prejudice they may have against changing for the lesson, should rapidly disappear. As an additional safeguard against chill the teacher should supervise the replacement of discarded clothing, immediately after the lesson.

### *Indoor Accommodation.*

There are too few schools in the district where inside accommodation is available for physical training during inclement weather. The need for revision of the handicapping conditions which obtain was pointed out in the 1935 report. Other controlling factors being equal, there is no doubt that children in such schools are losing valuable training, for, spasmodic physical activity can never achieve results comparable with those obtained where the work is sustained in unbroken progression.

### *Swimming.*

The undisputed value of this branch of physical training, giving as it does a unique form of exercise, need not be elaborated either from the point of view of providing all-round and harmonious development, or of its utility in cases of emergency. It is therefore deplorable that, owing to the absence of Swimming Baths for the children of Coseley, swimming cannot be included in their school curriculum.

### *Evening Classes.*

#### **WOMEN. Keep-fit, Recreational Physical Training.**

1. Mount Pleasant Senior Girls' School.
2. Parkfield Infants' School (Parents' Association).

#### **MEN. Recreational Gymnastics.**

1. Manor Boys' Senior School.

The existence of the above classes shows the desire of adults in this area to take an active part in the National Fitness Campaign.

Every Part III. area in S. Staffordshire now has one or more classes of a recreational character for men and women.

(Signed) G. HEYHOE.

N. E. DAVID.

### Provision of Meals.

The number of children receiving milk in the schools at a reduced rate was 1,470, a slight increase over last year.

This refers to individual children and practically all of these take milk as a routine throughout the school year.

Many parents mention that the children spend on sweets the money with which they are supplied to buy milk and I feel that if official disapproval was shown of sweets as an alternative to milk it would be a marked advance in the right direction.

### Co-operation of Parents and Attendance Officer.

It is a source of great satisfaction to see such a high percentage of parents present at the Routine and Special Medical Inspections. A degree of mutual understanding is reached in this way which would otherwise be impossible.

Close contact is maintained with the School Attendance Officer and his assistance I would acknowledge.

### Voluntary Bodies.

The Staffordshire Association for Mental Welfare—to which the Annual grant of £30 by the Coseley Education Committee has been renewed—continues to render unobtrusive but invaluable service and I greatly appreciate the co-operation given by the staff of the Association.

The National Society for Prevention of Cruelty to Children—through their Local Inspector Mr. Budd—are always ready with advice and help and provide a valuable asset in the difficult case.

### Blind Children.

The two blind children belonging to the district are both in Birmingham Royal Institute for the Blind.

There are two partially sighted children in the area.

### Deaf Children.

Four such cases are noted and three of these are in Certified Schools for the Deaf.

### Epileptic Children.

The one case on the list is in Soss Moss Residential School, near Manchester.

### Mentally Defective Children.

18 of these children are in our area and nine of these attend Occupation Centres under the Staffordshire Association for Mental Welfare.

The Board of Education recognise Dr. C. H. Waddell and myself as Certifying Officers under the Mental Deficiency Acts.

Two children were notified to the County during the year as ineducable.

I append the report from Miss Tosh, B.A., the Organising Secretary of the Association on the work carried out by her organisation for the Coseley Education Committee during 1937.

### STAFFORDSHIRE ASSOCIATION FOR MENTAL WELFARE.

I have pleasure in reporting that a further year of work on behalf of Coseley's feeble-minded children has been carried out by the Association during 1937.

The number of children on the books during the year is 23, two of them were referred in 1937. Over 70 domiciliary visits have been paid to the homes of these children by the Association, and many interviews held on their behalf. 10 children under supervision have been attending the Bilston Occupation Centre, where the advice on care and training given to the parents when visiting them is supplemented by the children's daily practical training at the Centre under the supervision of Miss Parry and her assistants. One of these, a boy has now been classified as educable in a special school and towards the end of the year arrangements were made for his admission to a residential school after efforts had been made to help him at the Centre.

In all 14 defectives from Coseley have been attending Centres in 1937, two of them being notified cases and two over 16 who are on our voluntary list.

The Association is very glad to be able to give practical help in the training of these children as experience has shown how vital is the question of early diagnosis and ascertainment of mental defectives if they are to be enabled to take their place in society instead of proving a hindrance. Two defectives have been notified as ineducable to the County Council during the year, this step

ensures for them the benefits of the Mental Deficiency Acts throughout their lives, whether through supervision, training, guardianship or institutional care. Their parents are relieved from the dread of feeling they will be left with no one to care for them, and through the constructive advice which is thus made available the parents can be guided to see how best to develop the child's possibilities for self-care and usefulness. In one case of a defective who is suffering also from physical defects and excluded from school, regular home teaching has been given by the Visitor. Two feeble-minded children have become 16 during the year, and for these there is no statutory provision to ensure their notification to the County Council, as they were not classifiable as ineducable before reaching that age. While this gap in legislation exists more use has to be made of notification as a "Special circumstances" case, when urgency for further care is present.

The Board of Education in Pamphlet 112 published this year, has again emphasised the first importance of early and accurate diagnosis throughout the whole school population, and urges that such ascertainment should go hand in hand with grouping for educational purposes not only the ineducable imbecile children, for whose training our Occupation Centres have been organised, and the feeble-minded children for whom Special Classes—that is to say special teachers and curricula—are essential for their development, but for all the dull and backward children also. From experience in group testing of a whole school population with the aid of standardised intelligence tests, it is likely that some 15% of the children left when the educable and ineducable children have been ascertained will be found to belong to the dull and backward group. It is certain that a considerable percentage of the delinquent school children is found in this group, and it must be a matter of grave concern to those who have to adjudicate in Children's Courts and to Probation Officers as well as to those responsible for the education of the children in our schools, that serious thought should be given to establishing facilities for the daily progress and development of the dull children in school, that they may learn to adjust themselves happily and rightly to society.

We are handicapped in dealing with some children because no Child Guidance Clinic is as yet available to serve the area. For problem cases knowledge, experience and time must be available if the child is to be understood and shown how to make good in life.

We are grateful for the measure of success in dealing with difficult children at the Occupation Centre, where through the freedom of individual approach to each child, many behaviour difficulties have disappeared.

The Camp holiday also provided evidence of the effect of a serene and happy atmosphere on the children who attended, and proved how well worth while it is to provide such valuable opportunities for the children's development. We were much encouraged by the Committee's support of this holiday which was attended by nine children from Coseley. Thanks to the activities of the Bilston Centre Committee, on which Coseley has representatives, the whole of the money necessary for the camp was raised.

Home visiting is the most effective method of keeping in touch with defective children, and supervision has provided a valuable link between the defective and the parent, and the defective and his training. The family group will always provide the most permanent training ground for the majority of children, and the importance of securing the parents' co-operation and special understanding of the defective child cannot be over estimated. We have to face the problem of the feeble-minded child's effort to adjust himself to the complex surroundings of an ordinary home and an ordinary environment. We find the normal child with the average reasoning power, judgment and independence of outlook sometimes failing to adjust himself, and becoming the difficult neurotic adult. The problem is more acute with the defective, whose reasoning power must be strengthened by constant regular training in good habits of behaviour and industry. Both home and school life should help to give him a sense of power and individuality coupled with a sense of himself as loving and lovable. To do this specialised training is necessary carried out by those who have tried to understand the backward child's thoughts and re-actions, and can help him to compensate for his limitations. We have to provide an environment which feeble-minded and dull children can understand, and where they can compete successfully, the solution of the problem seems to be the establishment of special schools and classes, with suitable teachers and curriculum within the elementary school system.

We would like to express our appreciation of the continued co-operation of the Coseley Education Committee with the Association in helping to give the defective his place in Society.

*(Signed) F. H. Tosh,*

*Organising Secretary.*

12th February, 1938.

The establishment of a Child Guidance clinic—mentioned in the foregoing report—is a matter which concerns every progressive authority.

The problem cases to which reference has been made will continue to crop up in every school population of any appreciable size and will continue to make one feel rather at a loss as to the best method of dealing with them.

Reference to a Child Guidance clinic immediately suggests itself but unfortunately a gap in our present service is then made apparent.

I feel that the setting up of such a clinic—available to an Authority such as ours for consultation purposes—would prove a notable addition to the present forces available for investigating and assisting the mental welfare of the children.

### **Health Education.**

The Health Visitors give lectures and demonstrations in Mothercraft to the girls in the Senior schools, and these are followed by a visit to Bayer Hall Clinic during the holding of a Child Welfare session.

### **Propaganda.**

The local activities in connection with the National Health Campaign included the schools within the scope of the scheme.

Copies of " Better Health " and leaflets from the Dental Board of the United Kingdom were distributed in the schools during the year.

### **Visits.**

Visits were paid by the pupils of the Senior Schools to works typical of many varied industries.

### **Holiday Camps.**

The three Senior Schools have taken their pupils to Holiday Camps in the past few years.

## **Juvenile Employment Bureau.**

### **Employment of Children and Young Persons.**

Bye Laws were made in 1921 and it appears that many children of both sexes are employed in Coseley to-day.

I think it may safely be said that the time is now opportune for a thorough review of the position so that the conditions of employment may, in every case, be clearly defined and observed.

## **Teaching Staff.**

I would in conclusion comment upon the harmonious relationship which exists with the teachers of the district and without which, any scheme would be bound to fail.

TABLE I.  
Medical Inspections of Children attending Public Elementary Schools.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups :—

Entrants	...	...	...	...	...	...	373
Second Age Group	...	...	...	...	...	...	360
Third Age Group	...	...	...	...	...	...	433
					Total	...	1,166

Number of other Routine Inspections	...	...	...	...	...	—	
					Grand Total	...	1,166

B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	...	...	151	
Number of Re-Inspections	...	...	...	...	...	467	
					Total	...	618

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

Number of *individual children* found at *Routine Medical Inspection* to require treatment (excluding Defects of Nutrition, Uncleanliness and Dental Diseases).

Group. (1)	For defective vision (exclud- ing squint). (2)	For all other conditions recorded in Table II A. (3)	Total. (4)
Entrants	—	191	191
Second Age Group	43	157	200
Third Age Group	56	128	184
Total (Prescribed Groups)	99	476	575
Other Routine Inspections	—	—	—
Grand Total	99	476	575

TABLE II.

A.—RETURN OF ILLFFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1937.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.																																									
	No. of Defects.	Requiring to be kept under observation, but not requiring Treatment (3)	No. of Defects.	Requiring to be kept under observation, but not requiring Treatment (5)																																								
SKIN ...	<table> <tr> <td>(1) Ringworm—Scalp ...</td> <td>...</td> <td>1</td> <td>—</td> <td>2</td> </tr> <tr> <td>(2) " Body ...</td> <td>...</td> <td>—</td> <td>—</td> <td>1</td> </tr> <tr> <td>(3) Scabies ...</td> <td>...</td> <td>1</td> <td>—</td> <td>—</td> </tr> <tr> <td>(4) Impetigo ...</td> <td>...</td> <td>3</td> <td>—</td> <td>—</td> </tr> <tr> <td>(5) Other Diseases (Non-Tuberculous) ...</td> <td>...</td> <td>26</td> <td>—</td> <td>8</td> </tr> <tr> <td>Total (Heads 1 to 5) ...</td> <td>31</td> <td>—</td> <td>—</td> <td>15</td> </tr> </table>	(1) Ringworm—Scalp ...	...	1	—	2	(2) " Body ...	...	—	—	1	(3) Scabies ...	...	1	—	—	(4) Impetigo ...	...	3	—	—	(5) Other Diseases (Non-Tuberculous) ...	...	26	—	8	Total (Heads 1 to 5) ...	31	—	—	15													
(1) Ringworm—Scalp ...	...	1	—	2																																								
(2) " Body ...	...	—	—	1																																								
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EYE ...	<table> <tr> <td>(6) Blepharitis ...</td> <td>...</td> <td>8</td> <td>—</td> <td>2</td> </tr> <tr> <td>(7) Conjunctivitis ...</td> <td>...</td> <td>1</td> <td>—</td> <td>—</td> </tr> <tr> <td>(8) Keratitis ...</td> <td>...</td> <td>—</td> <td>—</td> <td>—</td> </tr> <tr> <td>(9) Corneal Opacities ...</td> <td>...</td> <td>—</td> <td>—</td> <td>—</td> </tr> <tr> <td>(10) Other Conditions (excluding Defective Vision and Squint) ...</td> <td>...</td> <td>4</td> <td>—</td> <td>3</td> </tr> <tr> <td>Total (Heads 6 to 10) ...</td> <td>13</td> <td>—</td> <td>—</td> <td>5</td> </tr> <tr> <td>(11) Defective Vision (excluding Squint) ...</td> <td>99</td> <td>—</td> <td>—</td> <td>15</td> </tr> <tr> <td>(12) Squint ...</td> <td>27</td> <td>—</td> <td>—</td> <td>5</td> </tr> </table>	(6) Blepharitis ...	...	8	—	2	(7) Conjunctivitis ...	...	1	—	—	(8) Keratitis ...	...	—	—	—	(9) Corneal Opacities ...	...	—	—	—	(10) Other Conditions (excluding Defective Vision and Squint) ...	...	4	—	3	Total (Heads 6 to 10) ...	13	—	—	5	(11) Defective Vision (excluding Squint) ...	99	—	—	15	(12) Squint ...	27	—	—	5			
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TABLE II. (A)—Continued.

**A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1937.**

TABLE II. (A)—Continued.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1937.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	No. of Defects.		No. of Defects.	Requiring to be kept under observation, but <i>not</i> requiring Treatment (5)
	Requiring Treatment	Requiring to be kept under observation, but <i>not</i> requiring Treatment (3)		
TUBERCULOSIS	(1)	(2)	(4)	(5)
	(27) Pulmonary—Definite ...	...	—	—
	(28) Suspected ...	...	—	—
	(29) Non-Pulmonary—Glands ...	...	—	—
		Bones and Joints ...	—	—
	(30) ...	...	—	—
	(31) ...	...	—	—
	(32) ...	...	—	—
	Total (Heads 29 to 32) ...	—	—	—
NERVOUS SYSTEM	(33) Epilepsy ...	...	—	—
	(34) Chorea ...	...	—	—
	(35) Other Conditions ...	...	—	—
DEFORMITIES	(36) Rickets ...	...	—	—
	(37) Spinal Curvature ...	...	—	—
	(38) Other Forms ...	...	—	—
	(39) Other Defects and Diseases (excluding Defects of Nutrition, Uncleanliness and Dental Diseases) ...	...	—	—
	Total number of defects ...	602	251	4

B.—CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE ROUTINE AGE GROUPS.

Age-Groups.	Number of Children Inspected.	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants ...	373	69	18.50	253	67.80	51	13.70	—	—
Second Age-group ...	360	40	11.11	269	74.72	51	14.17	—	—
Third Age-group ...	433	104	24.02	292	67.44	36	8.31	1	0.23
Other Routine Inspections	—	—	—	—	—	—	—	—	—
Total ...	1,166	213	18.26	814	69.81	138	11.84	1	.09

**TABLE III.**  
RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

**BLIND CHILDREN.**

A blind child is defined by Section 69 of the Education Act, 1921, as one who is "too blind to be able to read the ordinary school books used by children." This definition covers some children who are totally, or almost totally, blind and can only be appropriately taught in a school for blind children, and others who have partial sight and can be appropriately taught in a school for partially sighted children. Only the first class should be included in this section.

At Certified Schools for the Blind.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
2	—	—	—	2

**PARTIALLY SIGHTED CHILDREN.**

Children who, though they cannot read ordinary school books or cannot read them without injury to their eyesight, have such power of vision that they can appropriately be taught in a school for the partially sighted.

Children who are able by means of suitable glasses to read the ordinary school books used by children without fatigue or injury to their vision should not be included in this Table.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	—	2	—	—	2

**DEAF CHILDREN.**

A deaf child is defined by Section 69 of the Education Act, 1921, as one who is "too deaf to be taught in a class of hearing children in an elementary school." This definition covers some children who are totally, or almost totally, deaf and can only be appropriately taught in a school for deaf children, and others who have partial hearing and can be appropriately taught in a school for partially deaf children. Only the first class should be included in this section.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
3	1	—	—	4

TABLE III.—Continued.

## PARTIALLY DEAF CHILDREN.

Children who can appropriately be taught only in a school for the partially deaf.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	—	—	—	—	—

## MENTALLY DEFECTIVE CHILDREN.

## FEEBLE-MINDED CHILDREN.

Mentally Defective children are children who, not being imbecile and not being merely dull or backward, are incapable by reason of mental defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools but are not incapable by reason of that defect of receiving benefit from instruction in Special Schools for mentally defective children.

The following Table should include all such children except those who have been notified to the Local Authority under the Mental Deficiency Act in accordance with Article 3 of the Mental Deficiency (Notification of Children) Regulations, 1928. Particulars relating to these children should be entered in the return of notified children—Form 307M.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	3	1	14*	18

\*Nine of these attend Centre.

## EPILEPTIC CHILDREN.

## CHILDREN SUFFERING FROM SEVERE EPILEPSY.

In this part of the Table only those children should be included who are epileptic within the meaning of the Act, *i.e.*, children who, not being idiots or imbeciles, are unfit by reason of severe epilepsy to attend the ordinary Public Elementary Schools.

For practical purposes the Board are of opinion that children who are subject to attacks of major epilepsy in school should be recorded as "severe" cases and excluded from ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
*1	—	—	—	1

\* Soss Moss Residential School, Manchester.

**TABLE III.—Continued.**  
**PHYSICALLY DEFECTIVE CHILDREN.**

**A.—TUBERCULOUS CHILDREN.**

Tuberculous children in areas other than Counties or County Boroughs who have been ascertained by the County Tuberculosis Officer should not appear in the Table for the County but in the Table for the appropriate area.

Only children diagnosed as tuberculous and requiring treatment for tuberculosis at a sanatorium, a dispensary, or elsewhere should be recorded in this category. Children suffering from crippling due to tuberculosis which is regarded as being no longer in need of treatment should be recorded as crippled children, provided that the degree of crippling conforms to the description of a crippled child given at the head of Section C below. All other tuberculous children who are regarded as being no longer in need of treatment should be recorded as delicate children provided the Medical Officer is prepared to certify under Section 55 of the Education Act, 1921, that they are incapable by reason of physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

*(i) Children suffering from Pulmonary Tuberculosis.  
 (Including pleura and intra-thoracic glands).*

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	6	1	1	8

*(ii) Children suffering from Non-Pulmonary Tuberculosis.*

At Certified Special Schools.	At Public Elementary Schools.*	At other Institutions.	At no School or Institution.	Total.
—	3	2	—	5

**B.—DELICATE CHILDREN.**

This Section should be confined to children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School. Such children should be included irrespective of the actual provision of Open Air Schools in the area, or of the practicability in present circumstances of sending the children to Residential Schools. At the same time it should be remembered that children should not be regarded as suitable for admission to an Open Air School unless the Medical Officer would be prepared to certify under Section 55 of the Education Act, 1921, that they are incapable by reason of physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	59	—	2	61

TABLE III.—Continued.

## C.—CRIPPLED CHILDREN.

Children (other than those diagnosed as tuberculous and in need of treatment for that disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life, *i.e.*, children who generally speaking are unable to take part, in any complete sense, in physical exercises or games or such activities of the school curriculum as gardening or forms of handwork usually engaged in by other children, and in whose case the Medical Officer would be prepared to certify under Section 55 of the Education Act, 1921, that they are incapable by reason of such physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	13	—	2	15

## D.—CHILDREN WITH HEART DISEASE.

Children in whose case the Medical Officer would be prepared to certify, under Section 55 of the Education Act, 1921, that they are incapable by reason of such physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	16	—	5	21

## CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Children suffering from any combination of the following types of defect:—

Blindness (excluding partially sighted children).

Deafness (excluding partially deaf children).

Mental Defect (Feeble-minded).

Severe Epilepsy.

Active Tuberculosis.

Crippling (as defined in Section C above).

Heart Disease.

The clinical condition causing the defect need not be specified; it will, for example, be sufficient to enter in Column 1,

Blind and Feeble-minded.

Deaf, Crippled and Heart.

Combination of Defect.	At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
Epilepsy and Mentally Defective	—	—	—	2	2*
Mentally Defective and Crippling	—	—	1	—	1

\* One attends Centre.

TABLE IV.

## Treatment Tables.

GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which see Table VI.)

Disease or Defect. (1)	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
<b>Skin:</b> —			
Ringworm-Scalp:—			
(i) X-Ray Treatment. If none, indicate by dash	—	—	—
(ii) Other Treatment   ...   ...   ...   ...	3	—	3
Ringworm-Body   ...   ...   ...   ...	7	—	7
Scabies   ...   ...   ...   ...	7	—	7
Impetigo   ...   ...   ...   ...	564	—	564
Other Skin Disease   ...   ...   ...   ...	138	11	149
<b>Minor Eye Defects</b> (External and other, but excluding cases falling in Group II.)   ...   ...   ...   ...	35	8	43
<b>Minor Ear Defects</b> ...   ...   ...   ...	27	4	31
<b>Miscellaneous</b> (e.g., minor injuries, bruises, sores, chilblains, etc.)   ...   ...   ...   ...	189	—	189
Total   ...	970	23	993

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group I.)

(1)	No. of Defects dealt with.		
	Under the Authority's Scheme. (2)	Otherwise (3)	Total. (4)
Errors of Refraction (including squint)   ...	35	41	76
Other defect or disease of the eyes (excluding those recorded in Group I.)   ...   ...   ...   ...	—	17	17
Total   ...	35	58	93
No. of Children for whom spectacles were			
(a) Prescribed   ...   ...   ...   ...	35	39	74
(b) Obtained   ...   ...   ...   ...	35	39	74

TABLE IV.—Continued.

## GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

## NUMBER OF DEFECTS.

## Received Operative Treatment.

Under the Authority's Scheme, in Clinic or Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.				Received other forms of Treatment.	Total number treated.				
		(1)	(2)	(3)	(4)						
—	—	(i) 11	(ii) 3	(iii) 21	(iv) 13	(i) 11	(ii) 3	(iii) 21	(iv) 13	5	53

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids. (iv) Other defects of the nose and throat.

TABLE IV.—Continued.  
GROUP IV.—ORTHOPAEDIC AND POSTURAL DEFECTS.

	Under the Authority's Scheme. (1)		Otherwise. (2)		Total number treated.
	Residential treatment with education. (i)	Residential treatment without education. (ii)	Residential treatment with education. (i)	Residential treatment without education. (ii)	
No. of children treated	—	—	—	—	20
					20

**TABLE V.**  
**DENTAL INSPECTION AND TREATMENT.**

(1) Number of children inspected by the Dentist :—

(a) Routine age-groups :—

Age.											Number
5	...	...	...	...	...	...	...	...	...	...	42
6	...	...	...	...	...	...	...	...	...	...	120
7	...	...	...	...	...	...	...	...	...	...	135
8	...	...	...	...	...	...	...	...	...	...	—
9	...	...	...	...	...	...	...	...	...	...	—
10	...	...	...	...	...	...	...	...	...	...	—
11	...	...	...	...	...	...	...	...	...	...	—
12	...	...	...	...	...	...	...	...	...	...	—
13	...	...	...	...	...	...	...	...	...	...	—
14	...	...	...	...	...	...	...	...	...	...	—
										Total	297
(b) Specials	...	...	...	...	...	...	...	...	...		194
(c) Total (Routine and Specials)	...	...	...	...	...	...	...	...	...		491
(2) Number found to require treatment	...	...	...	...	...	...	...	...	...		476
(3) Number actually treated	...	...	...	...	...	...	...	...	...		419
(4) Attendances made by children for treatment	...	...	...	...	...	...	...	...	...		451
(5) Half-days devoted to :—											
Inspection	...	...	...	...	...	...	...	...	...		4
Treatment	...	...	...	...	...	...	...	...	...		51
										Total	55
(6) Fillings :—											
Permanent Teeth	...	...	...	...	...	...	...	...	...		2
Temporary Teeth	...	...	...	...	...	...	...	...	...		4
										Total	6
(7) Extractions :—											
Permanent Teeth	...	...	...	...	...	...	...	...	...		187
Temporary Teeth	...	...	...	...	...	...	...	...	...		654
										Total	841
(8) Administrations of general anaesthetics for extractions	...	...	...	...	...	...	...	...	...		—
(9) Other Operations :—											
Permanent Teeth	...	...	...	...	...	...	...	...	...		18
Temporary Teeth	...	...	...	...	...	...	...	...	...		292
										Total	310

**TABLE VI.**  
**UNCLEANLINESS AND VERMINOUS CONDITIONS.**

(i)	Average number of visits per school made during the year by the School Nurse	...	...	...	...	...	...	...	...		2
(ii)	Total number of examinations of children in the Schools by School Nurse	...	...	...	...	...	...	...	...		7,618
(iii)	Number of <i>individual</i> children found unclean	...	...	...	...	...	...	...	...		466
(iv)	Number of <i>individual</i> children cleansed under Section 87 (2) and (3) of the Education Act, 1921	...	...	...	...	...	...	...	...		186
(v)	Number of cases in which legal proceedings were taken :—										
	(a) Under the Education Act, 1921	...	...	...	...	...	...	...	...		—
	(b) Under School Attendance Byelaws	...	...	...	...	...	...	...	...		10

## SUMMARY OF PRINCIPAL STATISTICS.

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### Number of Departments under the Coseley Education Authority.

There are 10 Blocks of Schools comprising 17 Departments.

### Voluntary Schools Included in the Above.

Infants 3, Junior 2.

### Accommodation.

Provided Schools 3,891. Non-Provided Schools 1,006. Total 4,897.

Average Attendance for the Year ended March 31st, 1937, 3,536.

Number of children on School Registers on December 31st, 1937, 3,859.

Total Accommodation :— Infants 1,467 ; Juniors 1,510. Juniors and Infants combined 2,977 ; Senior 1,920 : Total 4,897.

### Total Defects Found.

#### (a) Routine Inspections :—

Requiring Treatment 602. For Observation 251.

#### (b) Special Inspections :—

Requiring Treatment 235. For Observation 4.

### Percentage of Children with Defects Requiring Treatment.

Entrants 51.20. Intermediates 55.55. Leavers 42.49.  
Average 44.16.

### Defective Vision.

Errors of Refraction 93. Glasses supplied 74.

### Minor Defects Treated at Clinics.

Skin 730. Eye 43. Ear 31. Miscellaneous 189. Total 993.

### Dental Inspection.

Children Examined 491. Children Treated 419.

### Cleanliness Inspection by School Nurse.

No. of Inspections 7,618.

Individual Children found unclean 466.

Number of children cleansed by Local Authority 186.







